

FY03 GPRA+ Indicator Descriptions and Logic (as of March 20, 2003)				
		The Indicator ID is composed of the following three elements: the Indicator (e.g., 001, A); the denominator (A, B, etc); and the numerator (1, 2, etc.)		
		Indicator IDs starting with number (e.g., 001.A.1) are GPRA indicators. Those starting with letters (e.g., A.A.1) are developmental indicators		
		Most indicators are based on or are ssurrogates for specific indicators from Healthy People 2010 -- see the Source column		
ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
001.A.1	Diabetes	Same as FY02. All GPRA User Population users.	Numerator 1: Same as FY02. Anyone diagnosed with Diabetes at any time before the end of the Report period.	Same as FY02. The system looks for at least one diagnosis (Purpose of Visit 250.00-250.93) recorded in the V POV file) any time on or before the end of the Report period. <input type="checkbox"/> <input type="checkbox"/> Ages are calculated at the beginning of the Report period.
001.A.2		Same as 1A.1.	Numerator 2: Same as FY02 (1B). Anyone diagnosed with Diabetes in the year prior to the end of the Report period.	Same as FY02. The system looks for at least one diagnosis (purpose of visit 250.00-250.93 recorded in the V POV file) any time in the year prior to the end of the Report period. <input type="checkbox"/> <input type="checkbox"/> Ages are calculated at the beginning of the Report period.
001.B.1		All male GPRA User Population users.	Same as 1.A.1	
001.B.2		Same as 1.B.1	Same as 1.A.2	
001.C.1		All female GPRA User Population users.	Same as 1.A.1	
001.C.2		Same as 1.C.1	Same as 1.A.2	
001.D.1		All male GPRA User Population users younger than age 15.	Same as 1.A.1	
001.D.2		Same as 1.D.1	Same as 1.A.2	
001.E.1		All male GPRA User Population users age 15 through 19	Same as 1.A.1	
001.E.2		Same as 1.E.1	Same as 1.A.2	
001.F.1		All male GPRA User Population users age 20 through 24.	Same as 1.A.1	
001.F.2		Same as 1.F.1	Same as 1.A.2	
001.G.1		All male GPRA User Population users age 25 through 34.	Same as 1.A.1	
001.G.2		Same as 1.G.1	Same as 1.A.2	
001.H.1		All male GPRA User Population users age 35 through 44.	Same as 1.A.1	
001.H.2		Same as 1.CB.1	Same as 1.A.2	
001.I.1		All male GPRA User Population users age 45 through 54.	Same as 1.A.1	
001.I.2		Same as 1.I.1	Same as 1.A.2	
001.J.1		All male GPRA User Population users age 55 through 64.	Same as 1.A.1	
001.J.2		Same as 1.J.1	Same as 1.A.2	
001.K.1		All male GPRA User Population users age 65 and older.	Same as 1.A.1	
001.K.2		Same as 1.K.1	Same as 1.A.2	
001.L.1		All female GPRA User Population users younger than age 15.	Same as 1.A.1	
001.L.2		Same as 1.L.1	Same as 1.A.2	
001.M.1		All female GPRA User Population users age 15 through 19.	Same as 1.A.1	
001.M.2		Same as 1.M.1	Same as 1.A.2	
001.N.1		All female GPRA User Population users age 20 through 24.	Same as 1.A.1	
001.N.2		Same as 1.N.1	Same as 1.A.2	
001.O.1		All female GPRA User Population users age 25 through 34.	Same as 1.A.1	
001.O.2		Same as 1.O.1	Same as 1.A.2	
001.P.1		All female GPRA User Population users age 35 through 44.	Same as 1.A.1	
001.P.2		Same as 1.P.1	Same as 1.A.2	
001.Q.1		All female GPRA User Population users age 45 through 54.	Same as 1.A.1	
001.Q.2		Same as 1.Q.1	Same as 1.A.2	
001.R.1		All female GPRA User Population users age 55 through 64.	Same as 1.A.1	
001.R.2		Same as 1.R.1	Same as 1.A.2	
001.S.1		All female GPRA User Population users age 65 and older.	Same as 1.A.1	
001.S.2		Same as 1.S.1	Same as 1.A.2	
001.TA.1		All GPRA User Population users younger than age 15.	Same as 1.A.1	
001.TA.2		Same as 1.TA.1	Same as 1.A.2	
001.TB.1		All GPRA User Population users age 15 through 19	Same as 1.A.1	
001.TB.2		Same as 1.TB.1	Same as 1.A.2	
001.TC.1		All GPRA User Population users age 20 through 24.	Same as 1.A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
001.TC.2		Same as 1.TC.1	Same as 1.A.2	
001.TD.1		All GPRA User Population users age 25 through 34.	Same as 1.A.1	
001.TD.2		Same as 1.TD.1	Same as 1.A.2	
001.TE.1		All GPRA User Population users age 35 through 44.	Same as 1.A.1	
001.TE.2		Same as 1.TE.1	Same as 1.A.2	
001.TF.1		All GPRA User Population users age 45 through 54.	Same as 1.A.1	
001.TF.2		Same as 1.TF.1	Same as 1.A.2	
001.TG.1		All GPRA User Population users age 55 through 64.	Same as 1.A.1	
001.TG.2		Same as 1.TG.1	Same as 1.A.2	
001.TH.1		All GPRA User Population users age 65 and older.	Same as 1.A.1	
001.TH.2		Same as 1.TH.1	Same as 1.A.2	
002.A.1	Diabetes: Glycemic Control	All GPRA User Population patients diagnosed with diabetes ever AND the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Numerator 1: Same as FY02. Number of patients with a Hemoglobin A1c documented in the year prior to the end of the Current Report period, regardless of the result.	<p>First Purpose of Visit 250.00-250.93 recorded in the V POV file at least one year prior to the end of the Report period.</p> <p>Numerators: GPRA+ searches RPMS for the most recent Hemoglobin A1c test in the year prior to the end of the Report period. If no test is found, GPRA+ searches for the last 3 Glucose values during the same period. If the HgA1c has a result that equals the term COMMENT, GPRA+ searches for the last 3 Glucose values.</p> <p>HgA1C tests are defined as CPT 83036 or by site-defined taxonomy DM AUDIT HGB A1C TAX. Glucose test is defined by Glucose taxonomy DM AUDIT GLUCOSE TESTS TAX.</p>
002.A.2		Same as 2A.1	Numerator 2: Patients with HgA1c less than or equal to (\leq) 7 OR with a mean of the last 3 Glucose values less than or equal (\leq) to 150.	
002.A.3		Same as 2A.1	Numerator 3: Same as FY02. Patients with HgA1c equal to or greater than (\geq) 9.5 or mean of the last 3 Glucose values equal to or greater than (\geq) 225.	Same as FY02. See 2A.1
002.A.4		Same as 2A.1	Numerator 4: same as FY02. Patients with undetermined Hemoglobin A1c or Glucose values. Undetermined is defined as 1) patients with no HgA1c OR with HgA1c documented but no value AND 2) less than 3 Glucose values OR documented Glucose without values.	
002.B.1		Same as FY02. All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis of 250.00-250.93 must have occurred at least 1 year prior to the end of the Report period.	Same as 2A.1	<p>Denominator: First Purpose of Visit 250.00-250.93 recorded in the V POV file at least one year prior to the end of the Report period. <input type="checkbox"/></p> <p><input type="checkbox"/> Numerator: Same as 2A</p>
002.B.2		Same as 2.B.1	Same as 2A.2	Same
002.B.3		Same as 2B.1	Same as 2A.3	
002.B.4		Same as 2B.1	Same as 2A.4	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
002.C.1		All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Same as 2A.1	Same as 2A
002.C.2		All active users GPRA User Population diagnosed with diabetes ever (numerator from Indicator #1), PLUS: <input type="checkbox"/> <input type="checkbox"/> 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of visit must be Diabetes (250.00-250.93). <input type="checkbox"/> <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred >1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one <input type="checkbox"/> encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Same as 2A.2	Same
002.C.3		Same as 2C.1	Same as 2A.3	
002.C.4		Same as 2C.1	Same as 2A.4	
002.D.1		All Active Clinical Users diagnosed with diabetes ever PLUS the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Numerator 1: Same as 2A.1	Denominator: First Purpose of Visit 250.00-250.93 recorded in the V POV file at least one year prior to the end of the Report period.
002.D.2		Same as 2.D.1	Numerator 2: Same as 2A.2	
002.D.3		Same as 2.D.1	Numerator 3: same as 2A.3	
002.D.4		Same as 2.D.1	Numerator 4: same as 2A.4	
003.A.1	Diabetes: Blood Pressure Control	Same as 2A.1. All GPRA User Population users diagnosed with diabetes ever AND the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Numerator 1: Patients with controlled BP, defined as the mean systolic value is less than or equal to (\leq) 130 AND the mean diastolic value is less than or equal to (\leq) 80.	For each of the 3 numerators, GPRA+ uses the last 3 Blood Pressures documented on non-ER visits in the year prior to the end of the Report period. If 3 BPs are not available, uses mean of last 2 non-ER BPs. The mean Systolic value is calculated by adding the last 3 (or 2) systolic values and dividing by 3 (or 2). The mean Diastolic value is calculated by adding the diastolic values from the last 3 (or 2) blood pressures and dividing by 3 (or 2).
003.A.2		Same as 2A.1	Numerator 2: Patients with BP that is not controlled, defined as not meeting the definition of controlled.	
003.A.3		Same as 2A.1	Numerator 3: [Same as FY02] Number of patients with undetermined BP control. Number of patients with less than 3 blood pressures documented in the year prior to the end of the Report period.	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
003.B.1		Same as 2B.1 Same as FY02. All active users GPRA User Population diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis (using POV) of 250.00-250.93 must have occurred >1 year prior to the end of the time period.	Numerator 1: Same as 3A.1	Same
003.B.2		Same as 2B.1	Numerator 2: Same as 3A.2	
003.B.3		Same as 2B.1	Numerator 3: Same as 3A.3	
003.C.1		Same as 2C.1 All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93)). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Numerator 1: Same as 3A.1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Numerator 3: [Same] Number of patients with undetermined BP control. Number of patients with less than 3 blood pressures documented in the year prior to the end of the Report period.	Same
003.C.2		Same as 2C.1	Numerator 2: Same as 3A.2	
003.C.3		Same as 2C.1	Numerator 3: Same as 3A.3	
003.D.1		Same as 2D.1. All Active Clinical Users diagnosed with diabetes ever PLUS the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Same as 3A.1	
003.D.2		Same as 2D.1	Same as 3A.2	
003.D.3		Same as 2D.1	Same as 3A.3	
004.A.1	Diabetes: Dyslipidemia Assessment	Same as 2A.1. All GPRA User Population users diagnosed with diabetes ever AND the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Numerator 1: [Same as FY02] Patients who have had either a LIPID PROFILE or an LDL, an HDL and Triglyceride (TG) (all three).	For each numerator, counts all Y instances reported, regardless of the results of the measurement. <input type="checkbox"/> Finds the last test done in the year prior to the end of the Report period for each of the tests described in the numerator. <input type="checkbox"/> The following taxonomies must be created and populated in order for this data in this indicator to be accurate: 1) DM AUDIT LDL CHOLESTEROL TAX – must contain all LDL lab tests <input type="checkbox"/> 2) DM AUDIT TRIGLYCERIDE TAX – must contain all Triglyceride tests <input type="checkbox"/> 3) DM AUDIT LIPID PROFILE TAX – must contain the Lipid Profile tests <input type="checkbox"/> 4) DM AUDIT HDL TAX – must contain the HDL Cholesterol lab tests <input type="checkbox"/> <input type="checkbox"/> For the following tests, CPT codes are also searched for and used as a hit: <input type="checkbox"/> 1) Lipid Profile : 80061 <input type="checkbox"/> 2) Triglyceride: 84478 <input type="checkbox"/> 3) LDL: 80061 & 83721 4) HDL: 83718
004.A.2		Same as 2A.1	Numerator 2: Patients with LDL completed, regardless of result.	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
004.A.3		Same as 2A.1	Numerator 3: Patients with LDL results of less than or equal to (<=) 100.	
004.B.1		Same as 2B.1. Same as FY02. All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis of 250.00-250.93 must have occurred at least 1 year prior to the end of the Report period.	Numerator 1: Same as 4A.1	Same
004.B.2		Same as 2B.1	Numerator 2: Same as 4A.2	
004.B.3		Same as 2B.1	Numerator 3: Same as 4A.3	
004.C.1		Same as 2C.1 All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). □ 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. □ 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. □ 4. The patient must be 19 years old or greater at the beginning of the time period. □ 5. The patient must never have had a creatinine greater than 5.	Numerator 1: Same as 4A.1	Same
004.C.2		Same as 2C.1	Numerator 2: Same as 4A.2	
004.C.3		Same as 2C.1	Numerator 3: Same as 4A.3	
004.D.1		Same as 2D.1. All Active Clinical Users diagnosed with diabetes ever PLUS the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Same as 4A.1	
004.D.2		Same as 2D.1	Same as 4A.2	
004.D.3		Same as 2D.1	Same as 4A.3	
005.A.1	Diabetes: Nephropathy Assessment	Same as 2A.1. All GPRA User Population patients diagnosed with diabetes ever AND the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Same as FY02. Patients with microalbumunuria test, regardless of result, or positive urine protein test done in year prior to the end of the Report period.	<p>Same as FY02</p> <p>Numerator: GPRA+ searches first for the last microalbumunuria test done in year prior to the end of the Report period, regardless of result (positive or negative). If none found, searches for last urine protein test with positive (Y) value in same time period.</p> <p>Positive value for urine protein is defined as:</p> <ol style="list-style-type: none"> 1) First character is a P or p 2) Contains a + sign 3) Contains a > symbol 4) The numeric value (if the result is a number) is > (greater than) 29 <p>The following taxonomies must be created and populated in order for this data in this indicator to be accurate:</p> <ol style="list-style-type: none"> 1) DM AUDIT URINE PROTEIN TAX— all urine protein tests 2) DM AUDIT MICROALBUMUNURIA TAX— all microalbumunuria tests <p>Microalbumunuria is also defined by CPT codes 82043, 82044</p>

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
005.B.1		Same as 2B.1. Same as FY02. All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis of 250.00-250.93 must have occurred at least 1 year prior to the end of the Report period.	Same as 5A.1	Same
005.C.1		Same as 2C.1 All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Same as 5A.1	Same
005.D.1		Same as 2D.1. All Active Clinical Users diagnosed with diabetes ever PLUS the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Same as 5A.1	
006.A.1	Diabetic Retinopathy	Same as 2A.1. All GPRA User Population patients diagnosed with diabetes ever AND the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Patients receiving retinal screening in the year prior to the end of the Report period, defined as: diabetic eye exam; or a NON-DNKA visit to an optometrist or ophthalmologist; or a Non-DNKA visit to ophthalmology, optometry, or tele-ophthalmology retinal screening clinics; or a documented refusal of a diabetic eye exam.	Numerator: GPRA+ searches in the following order for: • diabetic eye exam: VExam code 03; or CPT codes 92250, 92012, 92014, 92015, 92004 or 92002 documented; • or a NON-DNKA visit to an optometrist or ophthalmologist(24, 79, 08); • or a Non-DNKA visit to ophthalmology, optometry, or tele-ophthalmology retinal screening clinics (codes 17, 18, 64, A2); • or a refusal of a diabetic eye exam documented.
006.B.1		Same as 2B.1. Same as FY02. All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS the patient must have had 2 visits in the past year and the first ever Diabetes diagnosis of 250.00-250.93 must have occurred at least 1 year prior to the end of the Report period.	Same as 6A.1	
006.C.1		Same as 2C.1 All GPRA User Population patients diagnosed with diabetes ever (numerator from Indicator #1), PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Same as 6A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
006.D.1		Same as 2D.1. All Active Clinical Users diagnosed with diabetes ever PLUS the first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period.	Same as 6A.1	
007.A.1	Women's Health – Reduce Cervical Cancer Mortality: Pap Smear	All females in the GPRA User Population ages 21 through 64 without a documented history of Hysterectomy.	Numerator 1: All females included in the denominator who had a Pap Smear in the three years prior to the end of the Report period.	<p>Denominator: Age of the patient is calculated at the beginning of the Report period. The difference between the age range 18-64 in the definition and 21-64 in the logic is because GPRA+ looks back 3 years for a test, i.e., when a patient who was 21 at the beginning of the Report period would have been 18.</p> <p>When determining if a patient has a history of hysterectomy, V Procedure: 68.3 – 68.7 or 68.9 before the end of the Report period.</p> <p>Numerator: A Pap Smear is searched for in the following way: <input type="checkbox"/> 1) V Lab is checked for a lab test called PAP SMEAR <input type="checkbox"/> 2) Purpose of Visits are checked for a Diagnosis of V76.2-SCREEN MAL NEOP-CERVIX <input type="checkbox"/> 3) Purpose of Visits are checked for a Diagnosis of V72.3 - GYNECOLOGIC EXAMINATION <input type="checkbox"/> 4) Procedures are checked for a procedure of 91.46 <input type="checkbox"/> 5) V CPT is checked for the following CPT codes: a) 88141-88150; b) 88152-88158 c) 88164-88167 NOTE: NPIRS uses 88151, is this correct?? 6) The Women's Health Tracking package is checked for documentation of a procedure called Pap Smear.</p> <p>Documented refusals are counted in the numerator. RCIS referral</p>
007.A.2		Same as 7.A.1	Numerator 2: Number of patients who refused a pap smear (subset of Numerator 1)	How is refusal documented?
007.B.1		All females in the Active Clinical population ages 21 through 64 without a documented history of Hysterectomy.	Same as 7A.1	
007.B.2		Same as 7.B.1	Same as 7.A.2. Numerator 2: Number of patients who refused a pap smear (subset of Numerator 1)	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
008.A.1	Women's Health – Reduce Breast Cancer Mortality. Mammogram	All females in the GPRA User Population ages 52 through 69 without a documented history of bilateral mastectomy.	All females included in the denominator who had a Mammogram documented in the two years prior to the end of the Report period. Documented refusals are counted in the numerator.	Denominator: A bilateral mastectomy is determined by: ICD Operation codes: 85.42; 85.44; 85.46; 85.48 Numerator: A Screening Mammogram is searched for in the following way: <input type="checkbox"/> 1) V Radiology is checked for a procedure of: <input type="checkbox"/> a. 76090 – Mammogram; unilateral <input type="checkbox"/> b. 76091 – Mammogram; bilateral <input type="checkbox"/> c. 76092 – Mammogram; screening <input type="checkbox"/> 2) Purpose of Visits are checked for a Diagnosis of: <input type="checkbox"/> a. V76.11 – screening mammogram for high risk patient <input type="checkbox"/> b. V76.12 – other screening mammogram <input type="checkbox"/> 3) Procedures are checked for a procedure of: <input type="checkbox"/> a. 87.37 – Other Mammography <input type="checkbox"/> b. 87.36 – Xerography of breast <input type="checkbox"/> c. 87.35 soft tissue X-ray of thorax, contrast radiogram of mammary ducts <input type="checkbox"/> 4) V CPT file is checked for CPT codes: 76090, 76091, 76092 <input type="checkbox"/> 5) The Women's Health Tracking package is checked for documentation of one of the following procedures: SCREENING MAMMOGRAM, MAMMOGRAM DX BILAT, MAMMOGRAM DX UNILAT <input type="checkbox"/>
008.A.2		Same as 8.A.1	Numerator 2: Number of patients in Numerator 1 who refused a mammogram (subset of Numerator 1)	
008.B.1		All females in the Active Clinical population ages 52 through 69 without a documented history of bilateral mastectomy.	Same as 8A.1	
008.B.2		Same as 8.B.1	Same as 8.A.2	
013.A.1	Oral Health: Access to Dental Service	Same as FY02. All patients in the GPRA User Population.	The number of patients in the denominator who had a dental ADA code 0000 or 0190 documented during the year prior to the end of the Current period.	The V Dental file in PCC is searched for an ADA code of 0000 or 0190.
014.A.1	Oral Health: Dental Sealants	No denominator. This indicator is a total count only, not a percentage.	The total number of dental sealants (code IH73 or 1351) during the year prior to the end of the Current period. Breakout by the following age groups: <12, 12-18, >18 and show a total.	The V Dental file in PCC is searched for any documented ADA code IH73 or an ADA code of 1351. NPIRS uses 1350 and 1355 -- are these correct??
014.A.2			The number of patients younger than 12 who had a dental sealant (code IH73 or 1351) during the year prior to the end of the Current period.	
014.A.3			The number of patients 12-18 who had a dental sealant (code IH73 or 1351) during the year prior to the end of the Current period.	
014.A.4			The number of patients age 18 and older who had a dental sealant (code IH73 or 1351) during the year prior to the end of the Current period.	
015.A.1	Oral Health: Diabetic Access to Dental Services	Based on Denominator #4 from Diabetes indicators 2-6. Active Diabetic patients any age, defined as: 1) first ever DM diagnosis (250.00-250.93) occurred at least one year prior to the end of the Report period; 2) at least 2 DM related visits ever, 3) at least one encounter with DM POV in a primary clinic with a primary provider during the year prior to the end of the Report period; and 4) never have had a creatinine value greater than 5.	The number of patients in the denominator who had a dental ADA code 0000 or 0190 documented during the year prior to the end of the Report period.	The V Dental file in PCC is searched for an ADA code of 0000 or 0190.

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
023.A.1	Public Health Nursing	Same as FY02. All GPRA User Population patients.	Same as FY02. Numerator 1: The number of patients in the denominator served by PHNs in any setting	A PHN visit is defined as any visit on which the primary of secondary provider has a provider discipline of 13 or 32. Visits in any setting include all PHN visits. Visits in the home setting include any visit with a clinic code of 11 or a location of encounter of HOME; the location used for HOME is entered by the user in the Site Parameters menu option from the System Setup menu.
023.A.2		Same as 23A.1	Same as FY02. Numerator 2: The number of patients in the denominator served by PHNs in a HOME setting	Visits in the home setting include any visit with a clinic code of 11 or a location of encounter of HOME; the location used for HOME is entered by the user in the Site Parameters menu option from the System Setup menu.
023.A.3		Same as 23A.1	Same as FY02. Numerator 3: The number of visits by PHNs in any setting	
023.A.4		Same as 23A.1	Same as FY02. Numerator 4: The number of visits by PHNs in a HOME setting	Visits in the home setting include any visit with a clinic code of 11 or a location of encounter of HOME; the location used for HOME is entered by the user in the Site Parameters menu option from the System Setup menu.
023.B.3		GPRA User Population patients age 0-28 days old (Neonate)	Same as 23.A.3	
023.B.4		Same as 23B.3	Same as 23.A.4	Visits in the home setting include any visit with a clinic code of 11 or a location of encounter of HOME (the location used for HOME is entered by the user).
023.C.3		GPRA User Population patients age 29 days – 12 months (Infants)	Same as 23.A.3	
023.C.4		Same as 23.C.3	Same as 23.A.4	
023.D.3		GPRA User Population patients ages 1-64 years	Same as 23.A.3	
023.D.4		Same as 23.D.3	Same as 23.A.4	
023.E.3		GPRA User Population patients aged 65 and over (Elders)	Same as 23.A.3	
023.E.4		Same as 23.E.3	Same as 23.A.4	
023.F.1		All Active Clinical patients.	Same as 23A.1	
023.F.2		Same as 23.F.1	Same as 23A.2	
023.F.3		Same as 23.F.1	Same as 23A.3	
023.F.4		Same as 23.F.1	Same as 23A.4	
023.G.3		All Active Clinical patients age 0-28 days (neonate)	Same as 23A.3	
023.G.4		Same as 23.G.3	Same as 23A.4	
023.H.3		All Active Clinical patients age 29 days - 12 months (infants)	Same as 23.A.3	
023.H.4		Same as 23.H.3	Same as 23.A.4	
023.I.3		All Active Clinical patients age 1-64 years	Same as 23.A.3	
023.I.4		Same as 23.I.3	Same as 23.A.4	
023.J.3		All Active Clinical patients age 65 and older (Elders)	Same as 23.A.3	
023.J.4		Same as 23.J.3	Same as 23A.4	
025.A.1	Adult Immunizations: Influenza	Denominator 1: All GPRA User Population patients who were age 55 or older at the beginning of the time period.	The number of patients in the denominator with Influenza vaccine documented in the year prior to the end of the Report period.	a) Immunization code: 88 - INFLUENZA VIRUS VACCINE, NOS ; and 12 (old code) b) POV of V04.8 or V06.6 c) CPT Codes: 90657-90660 d) ICD Procedure code: 99.52 NPIRS also uses CPT code 90471 -- are these correct??
025.B.1		Denominator 1A: All GPRA User Population patients who were age 55-64 at the beginning of the time period.	Same as 25.A.1	
025.C.1		Denominator 1B: All GPRA User Population patients who were age 65 and older at the beginning of the time period.	Same as 25.A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
025.D.1		Denominator 2: Same as Denominator #4 from Diabetes indicators 2-6. Active Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report period, 2) whose first ever DM diagnosis occurred at least one year prior to the end of the Report period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the year prior to the end of the Report period; and 5) never have had a creatinine value greater than 5.	Same as 25A.1	Denominator: similar to 2-6 C, but age range is 18 and older
025.E.1		Denominator 1: All Active Clinical patients who were age 55 or older at the beginning of the time period.	Same as 25A.1	
025.H.1		Denominator 1A: All Active Clinical patients who were age 55-64 at the beginning of the time period.	Same as 25A.1	
025.I.1		Denominator 1B: All Active Clinical patients who were age 65 and older at the beginning of the time period.	Same as 25A.1	
026.A.1	Adult Immunizations: Pneumococcal	Denominator 1: All GPRA User Population patients who were age 65 or older at the beginning of the time period.	The number of patients in the denominator with pneumovax documented at any time before the end of the Report period.	Immunization codes: 33 - PNEUMOCOCCAL POLYSACCHARIDE VACCINE; 19 (old code) POV: V06.6; V03.89, V03.82 ICD: 99.55 CPT: 90732
026.B.1		Denominator 2: See 25.B.1. All GPRA User Population patients who were age 18 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS (from indicator 2C): 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). □ 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. □ 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. □ 4. The patient must be 19 years old or greater at the beginning of the time period. □ 5. The patient must never have had a creatinine greater than 5.	Same as 26A.1	
026.C.1		All Active Clinical patients who were age 65 or older at the beginning of the time period.	Same as 26A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
030-1.AA.1	Cardiovascular Disease Prevention: Lipids Assessment	All GPRA User Population patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis 250.00-250.93 ever)	Numerator 1: Patients who have had either a LIPID PROFILE or an LDL, an HDL and Triglyceride (TG) (all three).	Denominator: age 45 or older at beginning of Report period. No diagnosis ever of diabetes (Purpose of Visit 250.00-250.93). <input type="checkbox"/> Numerator: same logic as 4A (different time period). For each numerator, counts all Y instances reported, regardless of the results of the measurement. Finds the last test done in the five years prior to the end of the Report period for each of the tests described in the numerators. <input type="checkbox"/> The following taxonomies must be created and populated in order for this data in this indicator to be accurate: 1) DM AUDIT LDL CHOLESTEROL TAX – must contain all LDL lab tests <input type="checkbox"/> 2) DM AUDIT TRIGLYCERIDE TAX – must contain all Triglyceride tests <input type="checkbox"/> 3) DM AUDIT LIPID PROFILE TAX – must contain the Lipid Profile tests <input type="checkbox"/> 4) DM AUDIT HDL TAX – must contain the HDL Cholesterol lab tests <input type="checkbox"/> For the following tests, CPT codes are also searched for and used as a hit: <input type="checkbox"/> 1) Lipid Profile : 80061 <input type="checkbox"/> 2) Triglyceride: 84478 <input type="checkbox"/> 3) LDL: 80061
030-1.AA.2		Same as 30-1.AA.1	Numerator 2: Patients with LDL <= 100	
030-1.AA.3		Same as 30-1.AA.1	Numerator 3: Patients with LDL 101-130	
030-1.AA.4		Same as 30-1.AA.1	Numerator 4: Patients with LDL 131-160	
030-1.AA.5		Same as 30-1.AA.1	Numerator 5: Patients with LDL > 160	
030-1.AB.1		All male GPRA User Population patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis ever).	Same as 30-1.AA.1	
030-1.AB.2		Same as 30-1.AB.1	Same as 30-1.AA.2	
030-1.AB.3		Same as 30-1.AB.1	Same as 30-1.AA.3	
030-1.AB.4		Same as 30-1.AB.1	Same as 30-1.AA.4	
030-1.AB.5		Same as 30-1.AB.1	Same as 30-1.AA.5	
030-1.AC.1		All female GPRA User Population patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis ever).	Same as 30-1.AA.1	
030-1.AC.2		Same as 30-1.AC.1	Same as 30-1.AA.2	
030-1.AC.3		Same as 30-1.AC.1	Same as 30-1.AA.3	
030-1.AC.4		Same as 30-1.AC.1	Same as 30-1.AA.4	
030-1.AC.5		Same as 30-1.AC.1	Same as 30-1.AA.5	
030-1.BA.1		Based on Denominator #4 from Diabetes indicator 2-6. All Active diabetic patients who were age 45 or older at the beginning of the time period, defined by meeting the following criteria: 1) whose first ever DM diagnosis occurred at least one year prior to the end of the Report period; 2) who had at least 2 DM related visits ever, 3) at least one encounter with DM POV in a primary clinic with a primary provider during the year prior to the end of the Report period; and 4) never have had a creatinine value greater than 5.	Same as 30-1.AA.1	
030-1.BA.2		Same as 30-1.BA.1	Same as 30-1.AA.2	
030-1.BA.3		Same as 30-1.BA.1	Same as 30-1.AA.3	
030-1.BA.4		Same as 30-1.BA.1	Same as 30-1.AA.4	
030-1.BA.5		Same as 30-1.BA.1	Same as 30-1.AA.5	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
030-1.BB.1		All male GPRA User Population patients who were age 45 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must never have had a creatinine greater than 5.	Same as 30-1.AA.1	
030-1.BB.2		Same as 30-1.BB.1	Same as 30-1.AA.2	
030-1.BB.3		Same as 30-1.BB.1	Same as 30-1.AA.3	
030-1.BB.4		Same as 30-1.BB.1	Same as 30-1.AA.4	
030-1.BB.5		Same as 30-1.BB.1	Same as 30-1.AA.5	
030-1.BC.1		All female GPRA User Population patients who were age 45 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must never have had a creatinine greater than 5.	Same as 30-1.AA.1	
030-1.BC.2		Same as 30-1.BC.1	Same as 30-1.AA.2	
030-1.BC.3		Same as 30-1.BC.1	Same as 30-1.AA.3	
030-1.BC.4		Same as 30-1.BC.1	Same as 30-1.AA.4	
030-1.BC.5		Same as 30-1.BC.1	Same as 30-1.AA.5	
030-1.CA.1		All Active Clinical patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis 250.00-250.93 ever).	Same as 30-1.AA.1	
030-1.CA.2		Same as 30-1.CA.1	Same as 30-1.AA.2	
030-1.CA.3		Same as 30-1.CA.1	Same as 30-1.AA.3	
030-1.CA.4		Same as 30-1.CA.1	Same as 30-1.AA.4	
030-1.CA.5		Same as 30-1.CA.1	Same as 30-1.AA.5	
030-1.CB.1		All male Active Clinical patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis ever).	Same as 30-1.AA.1	
030-1.CB.2		Same as 30-1.CB.1	Same as 30-1.AA.2	
030-1.CB.3		Same as 30-1.CB.1	Same as 30-1.AA.3	
030-1.CB.4		Same as 30-1.CB.1	Same as 30-1.AA.4	
030-1.CB.5		Same as 30-1.CB.1	Same as 30-1.AA.5	
030-1.CC.1		All female Active Clinical patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis ever).	Same as 30-1.AA.1	
030-1.CC.2		Same as 30-1.CC.1	Same as 30-1.AA.2	
030-1.CC.3		Same as 30-1.CC.1	Same as 30-1.AA.3	
030-1.CC.4		Same as 30-1.CC.1	Same as 30-1.AA.4	
030-1.CC.5		Same as 30-1.CC.1	Same as 30-1.AA.5	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
030-2.AA.1	Cardiovascular Disease Prevention: Hypertension Levels	All GPRA User Population patients ages 45 and over at the beginning of the Report period who are not diabetic (no diagnosis 250.00-250.93 ever).	Numerator 1: Patients with optimal Blood Pressure (BP), defined as the mean systolic value is less than or equal to (\leq) 130 AND the mean diastolic value is less than or equal to (\leq) 85.	Denominator: age 45 or older at beginning of Report period. No diagnosis ever of diabetes (Purpose of Visit 250.00-250.93). <input type="checkbox"/> For each of the numerators, GPRA+ uses the last 2 Blood Pressures documented on non-ER visits in the year prior to the end of the Report period. The mean Systolic value is calculated by adding the last 2 systolic values and dividing by 2. The mean Diastolic value is calculated by adding the diastolic values from the last 2 blood pressures and dividing by 2. If the systolic and diastolic values do not BOTH meet one of the four categories listed above, then the value that is least controlled determines the category.
030-2.AA.2		Same as 30-2.AA.1	Numerator 2: Patients with controlled Blood Pressure (BP), defined as the mean systolic value is greater than ($>$) 130 and less than or equal to (\leq) 139 AND the mean diastolic value is greater than ($>$) 85 and less than or equal to (\leq) 90.	
030-2.AA.3		Same as 30-2.AA.1	Numerator 3: Patients with uncontrolled Blood Pressure (BP), defined as the mean systolic value is greater than ($>$) 139 and less than or equal to (\leq) 159 AND the mean diastolic value is greater than ($>$) 90 and less than or equal to (\leq) 100.	
030-2.AA.4		Same as 30-2.AA.1	Numerator 4: Patients with severe uncontrolled Blood Pressure (BP), defined as the mean systolic value is greater than ($>$) 159 AND the mean diastolic value is greater than ($>$) 100.	
030-2.AA.5		Same as 30-2.AA.1	Numerator 5: Number of patients with undetermined BP	Undetermined = Number of patients with less than 2 blood pressures documented in the year prior to the end of the Report period.
030-2.AB.1		All male GPRA User Population patients ages 45 and over who are not diabetic.	Same as 30-2.AA.1	
030-2.AB.2		Same as 30-2.AB.1	Same as 30-2.AA.2	
030-2.AB.3		Same as 30-2.AB.1	Same as 30-2.AA.3	
030-2.AB.4		Same as 30-2.AB.1	Same as 30-2.AA.4	
030-2.AB.5		Same as 30-2.AB.1	Same as 30-2.AA.5	
030-2.AC.1		All female GPRA User Population patients ages 45 and over who are not diabetic.	Same as 30-2.AA.1	
030-2.AC.2		Same as 30-2.AC.1	Same as 30-2.AA.2	
030-2.AC.3		Same as 30-2.AC.1	Same as 30-2.AA.3	
030-2.AC.4		Same as 30-2.AC.1	Same as 30-2.AA.4	
030-2.AC.5		Same as 30-2.AC.1	Same as 30-2.AA.5	
030-2.BA.1		All GPRA User Population patients who were age 45 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93)). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must never have had a creatinine greater than 5.	Same as 30-2.AA.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
030-2.BA.2		Same as 30-2.BA.1	Same as 30-2.AA.2	
030-2.BA.3		Same as 30-2.BA.1	Same as 30-2.AA.3	
030-2.BA.4		Same as 30-2.BA.1	Same as 30-2.AA.4	
030-2.BA.5		Same as 30-2.BA.1	Same as 30-2.AA.5	
030-2.BB.1		All male GPRA User Population patients who were age 45 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must never have had a creatinine greater than 5.	Same as 30-2.AA.1	
030-2.BB.2		Same as 30-1.BB.1	Same as 30-2.AA.2	
030-2.BB.3		Same as 30-1.BB.1	Same as 30-2.AA.3	
030-2.BB.4		Same as 30-1.BB.1	Same as 30-2.AA.4	
030-2.BB.5		Same as 30-1.BB.1	Same as 30-2.AA.5	
030-2.BC.1		All female GPRA User Population patients who were age 45 or older at the beginning of the time period AND diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must never have had a creatinine greater than 5.	Same as 30-2.AA.1	
030-2.BC.2		Same as 30-2.BC.1	Same as 30-2.AA.2	
030-2.BC.3		Same as 30-2.BC.1	Same as 30-2.AA.3	
030-2.BC.4		Same as 30-2.BC.1	Same as 30-2.AA.4	
030-2.BC.5		Same as 30-2.BC.1	Same as 30-2.AA.5	
030-2.CA.1		All Active Clinical patients ages 45 and older.	Same as 30-2.AA.1	
030-2.CA.2		Same as 30-2.CA.1	Same as 30-2.AA.2	
030-2.CA.3		Same as 30-2.CA.1	Same as 30-2.AA.3	
030-2.CA.4		Same as 30-2.CA.1	Same as 30-2.AA.4	
030-2.CA.5		Same as 30-2.CA.1	Same as 30-2.AA.5	
030-2.CB.1		All male Active Clinical patients ages 45 and older.	Same as 30-2.AA.1	
030-2.CB.2		Same as 30-2.CB.1	Same as 30-2.AA.2	
030-2.CB.3		Same as 30-2.CB.1	Same as 30-2.AA.3	
030-2.CB.4		Same as 30-2.CB.1	Same as 30-2.AA.4	
030-2.CB.5		Same as 30-2.CB.1	Same as 30-2.AA.5	
030-2.CC.1		All female Active Clinical patients ages 45 and older.	Same as 30-2.AA.1	
030-2.CC.2		Same as 30-2.CC.1	Same as 30-2.AA.2	
030-2.CC.3		Same as 30-2.CC.1	Same as 30-2.AA.3	
030-2.CC.4		Same as 30-2.CC.1	Same as 30-2.AA.4	
030-2.CC.5		Same as 30-2.CC.1	Same as 30-2.AA.5	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.AA.1	Obesity Prevention and Treatment Plan	Denominator 1: Same as FY02. All GPRA User Population patients ages 2 through 74 at beginning of Report period.	Numerator 1: [same as FY02] those for whom a BMI could be calculated	Denominator: age is calculated at the beginning of the Report period. □ Numerator: Calculates BMI using NHANES II.□ For 18 and under, a height and weight must be taken on the same day any time in the year prior to the end of the Report period.□ For 19 through 50, BMI within last five years.□ For over 50, BMI within last two years
031.AA.2		Same as 31.AA.1	Numerator 2: For those with a BMI calculated, those considered overweight but not obese using BMI and standard BMI tables.	Numerator 2: Overweight but not obese is defined as BMI of 25 through 29 for adults 19 and older. For ages 2-18, based on standard tables.
031.AA.3		Same as 31.AA.1	Numerator 3: For those with a BMI calculated, those considered obese using BMI and standard BMI tables.	Numerator 3: Obese is defined as BMI of 30 or more for adults 19 and older; For ages 2-18, based on standard tables.
031.AA.4		Same as 31.AA.1	Numerator 4: Total of overweight and obese.	
031.AB.1		All male GPRA User Population patients ages 2 and older.	Same as 31.AA.1	
031.AB.2		Same as 31.AB.1	Same as 31.AA.2	
031.AB.3		Same as 31.AB.1	Same as 31.AA.3	
031.AB.4		Same as 31.AB.1	Same as 31.AA.4	
031.AC.1		All female GPRA User Population patients ages 2 and older.	Same as 31.AA.1	
031.AC.2		Same as 31.AC.1	Same as 31.AA.2	
031.AC.3		Same as 31.AC.1	Same as 31.AA.3	
031.AC.4		Same as 31.AC.1	Same as 31.AA.4	
031.AD.1		All GPRA User Population patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.AD.2		Same as 31.AD.1	Same as 31.AA.2	
031.AD.3		Same as 31.AD.1	Same as 31.AA.3	
031.AD.4		Same as 31.AD.1	Same as 31.AA.4	
031.AE.1		All male GPRA User Population patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.AE.2		Same as 31.AE.1	Same as 31.AA.2	
031.AE.3		Same as 31.AE.1	Same as 31.AA.3	
031.AE.4		Same as 31.AE.1	Same as 31.AA.4	
031.AF.1		All female GPRA User Population patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.AF.2		Same as 31.AF.1	Same as 31.AA.2	
031.AF.3		Same as 31.AF.1	Same as 31.AA.3	
031.AF.4		Same as 31.AF.1	Same as 31.AA.4	
031.AG.1		All GPRA User Population patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.AG.2		Same as 31.AG.1	Same as 31.AA.2	
031.AG.3		Same as 31.AG.1	Same as 31.AA.3	
031.AG.4		Same as 31.AG.1	Same as 31.AA.4	
031.AH.1		All male GPRA User Population patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.AH.2		Same as 31.AH.1	Same as 31.AA.2	
031.AH.3		Same as 31.AH.1	Same as 31.AA.3	
031.AH.4		Same as 31.AH.1	Same as 31.AA.4	
031.AI.1		All female GPRA User Population patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.AI.2		Same as 31.AI.1	Same as 31.AA.2	
031.AI.3		Same as 31.AI.1	Same as 31.AA.3	
031.AI.4		Same as 31.AI.1	Same as 31.AA.4	
031.AJ.1		All GPRA User Population patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.AJ.2		Same as 31.AJ.1	Same as 31.AA.2	
031.AJ.3		Same as 31.AJ.1	Same as 31.AA.3	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.AJ.4		Same as 31.AJ.1	Same as 31.AA.4	
031.AK.1		All male GPRA User Population patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.AK.2		Same as 31.AK.1	Same as 31.AA.2	
031.AK.3		Same as 31.AK.1	Same as 31.AA.3	
031.AK.4		Same as 31.AK.1	Same as 31.AA.4	
031.AL.1		All female GPRA User Population patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.AL.2		Same as 31.AL.1	Same as 31.AA.2	
031.AL.3		Same as 31.AL.1	Same as 31.AA.3	
031.AL.4		Same as 31.AL.1	Same as 31.AA.4	
031.AM.1		All GPRA User Population patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	
031.AM.2		Same as 31.AM.1	Same as 31.AA.2	
031.AM.3		Same as 31.AM.1	Same as 31.AA.3	
031.AM.4		Same as 31.AM.1	Same as 31.AA.4	
031.AN.1		All male GPRA User Population patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	
031.AN.2		Same as 31.AN.1	Same as 31.AA.2	
031.AN.3		Same as 31.AN.1	Same as 31.AA.3	
031.AN.4		Same as 31.AN.1	Same as 31.AA.4	
031.AO.1		All female GPRA User Population patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	
031.AO.2		Same as 31.AO.1	Same as 31.AA.2	
031.AO.3		Same as 31.AO.1	Same as 31.AA.3	
031.AO.4		Same as 31.AO.1	Same as 31.AA.4	
031.AP.1		All GPRA User Population patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.AP.2		Same as 31.AP.1	Same as 31.AA.2	
031.AP.3		Same as 31.AP.1	Same as 31.AA.3	
031.AP.4		Same as 31.AP.1	Same as 31.AA.4	
031.AQ.1		All male GPRA User Population patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.AQ.2		Same as 31.AQ.1	Same as 31.AA.2	
031.AQ.3		Same as 31.AQ.1	Same as 31.AA.3	
031.AQ.4		Same as 31.AQ.1	Same as 31.AA.4	
031.AR.1		All female GPRA User Population patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.AR.2		Same as 31.AR.1	Same as 31.AA.2	
031.AR.3		Same as 31.AR.1	Same as 31.AA.3	
031.AR.4		Same as 31.AR.1	Same as 31.AA.4	
031.AS.1		All GPRA User Population patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.AS.2		Same as 31.AS.1	Same as 31.AA.2	
031.AS.3		Same as 31.AS.1	Same as 31.AA.3	
031.AS.4		Same as 31.AS.1	Same as 31.AA.4	
031.AT.1		All male GPRA User Population patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.AT.2		Same as 31.AT.1	Same as 31.AA.2	
031.AT.3		Same as 31.AT.1	Same as 31.AA.3	
031.AT.4		Same as 31.AT.1	Same as 31.AA.4	
031.AU.1		All female GPRA User Population patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.AU.2		Same as 31.AU.1	Same as 31.AA.2	
031.AU.3		Same as 31.AU.1	Same as 31.AA.3	
031.AU.4		Same as 31.AU.1	Same as 31.AA.4	
031.AV.1		All GPRA User Population patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.AV.2		Same as 31.AV.1	Same as 31.AA.2	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.AV.3		Same as 31.AV.1	Same as 31.AA.3	
031.AV.4		Same as 31.AV.1	Same as 31.AA.4	
031.AW.1		All male GPRA User Population patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.AW.2		Same as 31.AW.1	Same as 31.AA.2	
031.AW.3		Same as 31.AW.1	Same as 31.AA.3	
031.AW.4		Same as 31.AW.1	Same as 31.AA.4	
031.AX.1		All female GPRA User Population patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.AX.2		Same as 31.AX.1	Same as 31.AA.2	
031.AX.3		Same as 31.AX.1	Same as 31.AA.3	
031.AX.4		Same as 31.AX.1	Same as 31.AA.4	
031.AY.1		All GPRA User Population patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.AY.2		Same as 31.AY.1	Same as 31.AA.2	
031.AY.3		Same as 31.AY.1	Same as 31.AA.3	
031.AY.4		Same as 31.AY.1	Same as 31.AA.4	
031.AZ.1		All male GPRA User Population patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.AZ.2		Same as 31.AZ.1	Same as 31.AA.2	
031.AZ.3		Same as 31.AZ.1	Same as 31.AA.3	
031.AZ.4		Same as 31.AZ.1	Same as 31.AA.4	
031.BA.1		All female GPRA User Population patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.BA.2		Same as 31.BA.1	Same as 31.AA.2	
031.BA.3		Same as 31.BA.1	Same as 31.AA.3	
031.BA.4		Same as 31.BA.1	Same as 31.AA.4	
031.BB.1		All GPRA User Population patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.BB.2		Same as 31.BB.1	Same as 31.AA.2	
031.BB.3		Same as 31.BB.1	Same as 31.AA.3	
031.BB.4		Same as 31.BB.1	Same as 31.AA.4	
031.BC.1		All male GPRA User Population patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.BC.2		Same as 31.BC.1	Same as 31.AA.2	
031.BC.3		Same as 31.BC.1	Same as 31.AA.3	
031.BC.4		Same as 31.BC.1	Same as 31.AA.4	
031.BD.1		All female GPRA User Population patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.BD.2		Same as 31.BD.1	Same as 31.AA.2	
031.BD.3		Same as 31.BD.1	Same as 31.AA.3	
031.BD.4		Same as 31.BD.1	Same as 31.AA.4	
031.CA.1		All Active Clinical patients ages 2 and older at beginning of Report period.	Numerator 1: [same as 31.AA.1] those for whom a BMI could be calculated	
031.CA.2		Same as 31.CA.1	Numerator 2: (same as 31.AA.2) For those with a BMI calculated, those considered overweight using BMI and standard BMI tables	
031.CA.3		Same as 31.CA.1	Numerator 2: (same as 31.AA.3) For those with a BMI calculated, those considered obese using BMI and standard BMI tables (NOT to include numerator 2).	
031.CA.4		Same as 31.CA.1	Numerator 3: [same as 31.AA.4] For those with a BMI calculated, those considered overweight using BMI and standard BMI tables.	
031.CB.1		All male Active Clinical patients ages 2 and older.	Same as 31.AA.1	
031.CB.2		Same as 31.CB.1	Same as 31.AA.2	
031.CB.3		Same as 31.CB.1	Same as 31.AA.3	
031.CB.4		Same as 31.CB.1	Same as 31.AA.4	
031.CC.1		All female Active Clinical patients ages 2 and older.	Same as 31.AA.1	
031.CC.2		Same as 31.CC.1	Same as 31.AA.2	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.CC.3		Same as 31.CC.1	Same as 31.AA.3	
031.CC.4		Same as 31.CC.1	Same as 31.AA.4	
031.CD.1		All Active Clinical patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.CD.2		Same as 31.CD.1	Same as 31.AA.2	
031.CD.3		Same as 31.CD.1	Same as 31.AA.3	
031.CD.4		Same as 31.CD.1	Same as 31.AA.4	
031.CE.1		All male Active Clinical patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.CE.2		Same as 31.CE.1	Same as 31.AA.2	
031.CE.3		Same as 31.CE.1	Same as 31.AA.3	
031.CE.4		Same as 31.CE.1	Same as 31.AA.4	
031.CF.1		All female Active Clinical patients ages 2 -5 at beginning of Report period.	Same as 31.AA.1	
031.CF.2		Same as 31.CF.1	Same as 31.AA.2	
031.CF.3		Same as 31.CF.1	Same as 31.AA.3	
031.CF.4		Same as 31.CF.1	Same as 31.AA.4	
031.CG.1		All Active Clinical patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.CG.2		Same as 31.CG.1	Same as 31.AA.2	
031.CG.3		Same as 31.CG.1	Same as 31.AA.3	
031.CG.4		Same as 31.CG.1	Same as 31.AA.4	
031.CH.1		All male Active Clinical patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.CH.2		Same as 31.CH.1	Same as 31.AA.2	
031.CH.3		Same as 31.CH.1	Same as 31.AA.3	
031.CH.4		Same as 31.CH.1	Same as 31.AA.4	
031.CI.1		All female Active Clinical patients ages 6-11 at beginning of Report period.	Same as 31.AA.1	
031.CI.2		Same as 31.CI.1	Same as 31.AA.2	
031.CI.3		Same as 31.CI.1	Same as 31.AA.3	
031.CI.4		Same as 31.CI.1	Same as 31.AA.4	
031.CJ.1		All Active Clinical patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.CJ.2		Same as 31.CJ.1	Same as 31.AA.2	
031.CJ.3		Same as 31.CJ.1	Same as 31.AA.3	
031.CJ.4		Same as 31.CJ.1	Same as 31.AA.4	
031.CK.1		All male Active Clinical patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.CK.2		Same as 31.CK.1	Same as 31.AA.2	
031.CK.3		Same as 31.CK.1	Same as 31.AA.3	
031.CK.4		Same as 31.CK.1	Same as 31.AA.4	
031.CL.1		All female Active Clinical patients ages 12-19 at beginning of Report period.	Same as 31.AA.1	
031.CL.2		Same as 31.CL.1	Same as 31.AA.2	
031.CL.3		Same as 31.CL.1	Same as 31.AA.3	
031.CL.4		Same as 31.CL.1	Same as 31.AA.4	
031.CM.1		All Active Clinical patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	
031.CM.2		Same as 31.CM.1	Same as 31.AA.2	
031.CM.3		Same as 31.CM.1	Same as 31.AA.3	
031.CM.4		Same as 31.CM.1	Same as 31.AA.4	
031.CN.1		All male Active Clinical patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	
031.CN.2		Same as 31.CN.1	Same as 31.AA.2	
031.CN.3		Same as 31.CN.1	Same as 31.AA.3	
031.CN.4		Same as 31.CN.1	Same as 31.AA.4	
031.CO.1		All female Active Clinical patients ages 20-24 at beginning of Report period.	Same as 31.AA.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.CO.2		Same as 31.CO.1	Same as 31.AA.2	
031.CO.3		Same as 31.CO.1	Same as 31.AA.3	
031.CO.4		Same as 31.CO.1	Same as 31.AA.4	
031.CP.1		All Active Clinical patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.CP.2		Same as 31.CP.1	Same as 31.AA.2	
031.CP.3		Same as 31.CP.1	Same as 31.AA.3	
031.CP.4		Same as 31.CP.1	Same as 31.AA.4	
031.CQ.1		All male Active Clinical patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.CQ.2		Same as 31.CQ.1	Same as 31.AA.2	
031.CQ.3		Same as 31.CQ.1	Same as 31.AA.3	
031.CQ.4		Same as 31.CQ.1	Same as 31.AA.4	
031.CR.1		All female Active Clinical patients ages 25-34 at beginning of Report period.	Same as 31.AA.1	
031.CR.2		Same as 31.CR.1	Same as 31.AA.2	
031.CR.3		Same as 31.CR.1	Same as 31.AA.3	
031.CR.4		Same as 31.CR.1	Same as 31.AA.4	
031.CS.1		All Active Clinical patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.CS.2		Same as 31.CS.1	Same as 31.AA.2	
031.CS.3		Same as 31.CS.1	Same as 31.AA.3	
031.CS.4		Same as 31.CS.1	Same as 31.AA.4	
031.CT.1		All male Active Clinical patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.CT.2		Same as 31.CT.1	Same as 31.AA.4	
031.CT.3		Same as 31.CT.1	Same as 31.AA.4	
031.CT.4		Same as 31.CT.1	Same as 31.AA.3	
031.CU.1		All female Active Clinical patients ages 35-44 at beginning of Report period.	Same as 31.AA.1	
031.CU.2		Same as 31.CU.1	Same as 31.AA.2	
031.CU.3		Same as 31.CU.1	Same as 31.AA.3	
031.CU.4		Same as 31.CU.1	Same as 31.AA.4	
031.CV.1		All Active Clinical patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.CV.2		Same as 31.CV.1	Same as 31.AA.2	
031.CV.3		Same as 31.CV.1	Same as 31.AA.3	
031.CV.4		Same as 31.CV.1	Same as 31.AA.4	
031.CW.1		All male Active Clinical patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.CW.2		Same as 31.CW.1	Same as 31.AA.2	
031.CW.3		Same as 31.CW.1	Same as 31.AA.3	
031.CW.4		Same as 31.CW.1	Same as 31.AA.4	
031.CX.1		All female Active Clinical patients ages 45-54 at beginning of Report period.	Same as 31.AA.1	
031.CX.2		Same as 31.CX.1	Same as 31.AA.2	
031.CX.3		Same as 31.CX.1	Same as 31.AA.3	
031.CX.4		Same as 31.CX.1	Same as 31.AA.4	
031.CY.1		All Active Clinical patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.CY.2		Same as 31.CY.1	Same as 31.AA.2	
031.CY.3		Same as 31.CY.1	Same as 31.AA.3	
031.CY.4		Same as 31.CY.1	Same as 31.AA.4	
031.CZ.1		All male Active Clinical patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.CZ.2		Same as 31.CZ.1	Same as 31.AA.2	
031.CZ.3		Same as 31.CZ.1	Same as 31.AA.3	
031.CZ.4		Same as 31.CZ.1	Same as 31.AA.4	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
031.DA.1		All female Active Clinical patients ages 55-74 at beginning of Report period.	Same as 31.AA.1	
031.DA.2		Same as 31.DA.1	Same as 31.AA.2	
031.DA.3		Same as 31.DA.1	Same as 31.AA.3	
031.DA.4		Same as 31.DA.1	Same as 31.AA.4	
031.DB.1		All Active Clinical patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.DB.2		Same as 31.DB.1	Same as 31.AA.2	
031.DB.3		Same as 31.DB.1	Same as 31.AA.3	
031.DB.4		Same as 31.DB.1	Same as 31.AA.4	
031.DC.1		All male Active Clinical patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.DC.2		Same as 31.DC.1	Same as 31.AA.2	
031.DC.3		Same as 31.DC.1	Same as 31.AA.3	
031.DC.4		Same as 31.DC.1	Same as 31.AA.4	
031.DD.1		All female Active Clinical patients ages 75 and older at beginning of Report period.	Same as 31.AA.1	
031.DD.2		Same as 31.DD.1	Same as 31.AA.2	
031.DD.3		Same as 31.DD.1	Same as 31.AA.3	
031.DD.4		Same as 31.DD.1	Same as 31.AA.4	
A.A.1	Diabetes and Mental Health	All GPRA User Population patients diagnosed with diabetes ever, PLUS: 1. The patient must have had at least 2 diabetes related visits ever. (Purpose of Visit must be Diabetes (250.00-250.93). <input type="checkbox"/> 2. The first ever Diabetes diagnosis must have occurred at least 1 year prior to the end of the Report period. <input type="checkbox"/> 3. At least one encounter at the given facility (based on the site the user logged in as) in a "primary care clinic" with a "primary care provider" with a purpose of visit of diabetes within the year prior to the end of the time period. A list of the primary care provider disciplines and primary care clinics is provided at the end of the GPRA+ User Manual. <input type="checkbox"/> 4. The patient must be 19 years old or greater at the beginning of the time period. <input type="checkbox"/> 5. The patient must never have had a creatinine greater than 5.	Same as FY02. The number of patients in the denominator with a diagnosis of depressive disorders, defined as at least two visits with diagnosis 296.0-313.1 in the year prior to the end of the Report period.	Denominator: same as 2-6C Numerator: at least two visits with diagnosis (purpose of visit 296.0-313.1 recorded in V POV file) in the year prior to the end of the Report period.
B.A.1	Colorectal Cancer. Reduce the Colorectal Cancer death rate	All GPRA User Population patients age 51 and older at beginning of the Report period.	Numerator 1: Patients who have had CRC screening, defined as any of the following: 1) a Fecal Occult Blood test or Rectal Exam in the two (2) years prior to the end of the Report period; 2) flexible sigmoidoscopy or double contrast barium enema in the last 5 years; or 3) colonoscopy in the last 10 years.	Age 51 at the beginning of the Report period. Any of the following should satisfy the requirements for this indicator: <input type="checkbox"/> 1. Presence of a Fecal Occult Blood lab test in the V LAB file: CPT 82274, G0107 2. A diagnosis code of V76.51, Screening for Colorectal Cancer (what about V76.41 Screening for Rectal) 3. An ICD Procedure code of 89.34, Rectal Exam 4. An ICD Procedure code of 45.24, Flexible Sigmoidoscopy 5. Any of the following ICD Procedure codes for Colonoscopy: 45.21, 45.22, 45.23, 45.25 <input type="checkbox"/> 6. Any of the following CPT codes for rigid proctosigmoidoscopy (some people still do these): 45300, 45303, 45305, 45307, 45308, 45309, 45315, 45317, 45320, 45321, 45327. <input type="checkbox"/> 7. Any of the following CPT codes for flexible sigmoidoscopy or colonoscopy: 45330-45334, 45337-45339, 45341, 45342, 45345, 45355, 45378-45380, 45382-45385, 45387 <input type="checkbox"/> 8. Double contrast barium enema: Procedure 87.64; VCPT or VRad: 74280, 74275, 74270

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
B.A.2		Same as B.A.1	Numerator 2: Patients who have had either a Fecal Occult Blood test or Rectal Exam in the past two years.	Any of the following should satisfy the requirements for this indicator: <input type="checkbox"/> 1. Presence of a Fecal Occult Blood lab test in the V LAB file <input type="checkbox"/> 2. A diagnosis code of V76.51, Screening for Colorectal Cancer (what about V76.41 Screening for Rectal) <input type="checkbox"/> 3. An ICD Procedure code of 89.34, Rectal Exam
B.B.1		All male GPRA User Population patients age 51 and older at beginning of the Report period.	Same as B.A.1	
B.B.2		Same as B.B.1	Same as B.A.2	
B.C.1		All female GPRA User Population patients age 51 and older at beginning of the Report period.	Same as B.A.1	
B.C.2		Same as B.C.1	Same as B.A.2	
B.D.1		Denominator 2: All Active Clinical patients ages 51 and older at beginning of the Report period.	Same as B.A.1	
B.D.2		Same as B.D.1	Same as B.A.2	
B.E.1		All male Active Clinical patients over age 51.	Same as B.A.1	
B.E.2		Same as B.E.1	Same as B.A.2	
B.F.1		All female Active Clinical patients over age 51.	Same as B.A.1	
B.F.2		Same as B.F.1	Same as B.A.2	
C-1.AA.1	Patient Education: Diet and Exercise	All GPRA User Population patients.	Numerator 1: All patients provided exercise education in the year prior to the end of the Report period.	Numerator: Any patient education code ending "-EX", ending "-LA", or containing "OBS-"
C-1.AA.2		Same as C-1.AA.1	Numerator 1: All patients provided diet and nutrition education in the year prior to the end of the Report period.	Numerator: Any patient education code ending "-N", ending "-LA", or containing "OBS-"
C-1.AB.1		All male GPRA User Population patients.	Same as C-1.AA.1	
C-1.AB.2		Same as C-1.AB.1	Same as C-1.AA.2	
C-1.AC.1		All female GPRA User Population patients.	Same as C-1.AA.1	
C-1.AC.2		Same as C-1.AC.1	Same as C-1.AA.2	
C-1.AD.1		All GPRA User Population patients ages 6-11 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AD.2		Same as C-1.AD.1	Same as C-1.AA.2	
C-1.AE.1		All male GPRA User Population patients ages 6-11 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AE.2		Same as C-1.AE.1	Same as C-1.AA.2	
C-1.AF.1		All female GPRA User Population patients ages 6-11 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AF.2		Same as C-1.AF.1	Same as C-1.AA.2	
C-1.AG.1		All GPRA User Population patients ages 12-19 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AG.2		Same as C-1.AG.1	Same as C-1.AA.2	
C-1.AH.1		All male GPRA User Population patients ages 12-19 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AH.2		Same as C-1.AH.1	Same as C-1.AA.2	
C-1.AI.1		All female GPRA User Population patients ages 12-19 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AI.2		Same as C-1.AI.1	Same as C-1.AA.2	
C-1.AJ.1		All GPRA User Population patients ages 20-39 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AJ.2		Same as C-1.AJ.1	Same as C-1.AA.2	
C-1.AK.1		All male GPRA User Population patients ages 20-39 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AK.2		Same as C-1.AK.1	Same as C-1.AA.2	
C-1.AL.1		All female GPRA User Population patients ages 20-39 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AL.2		Same as C-1.AL.1	Same as C-1.AA.2	
C-1.AM.1		All GPRA User Population patients ages 40-59 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AM.2		Same as C-1.AM.1	Same as C-1.AA.2	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
C-1.AN.1		All male GPRA User Population patients ages 40-59 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AN.2		Same as C-1.AN.1	Same as C-1.AA.2	
C-1.AO.1		All female GPRA User Population patients ages 40-59 at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AO.2		Same as C-1.AO.1	Same as C-1.AA.2	
C-1.AP.1		All GPRA User Population patients ages 60 and older at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AP.2		Same as C-1.AP.1	Same as C-1.AA.2	
C-1.AQ.1		All male GPRA User Population patients ages 60 and older at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AQ.2		Same as C-1.AQ.1	Same as C-1.AA.2	
C-1.AR.1		All female GPRA User Population patients ages 60 and older at the beginning of the Report period.	Same as C-1.AA.1	
C-1.AR.2		Same as C-1.AR.1	Same as C-1.AA.2	
C-1.BA.1	Patient Education: Diet and Exercise for Diabetics	Denominator 3: Same as Denominator #4 from Diabetes indicators 2-6. Active Diabetic patients, defined by meeting the following criteria: 1) who are 19 or older at the beginning of the Report period, 2) whose first ever DM diagnosis occurred at least one year prior to the end of the Report period; 3) who had at least 2 DM related visits ever, 4) at least one encounter with DM POV in a primary clinic with a primary provider during the year prior to the end of the Report period; and 5) never have had a creatinine value greater than 5	Same as C-1.AA.1. All patients provided exercise education.	Denominator: same as 2-6C
C-1.BA.2		Same as C-1.BA.1	Same as C-1.AA.2. All patients provided diet education.	
C-1.BB.1		C-1.BA.1 male only	Same as C-1.AA.1.	
C-1.BB.2		Same as C-1.BB.1	Same as C-1.AA.2	
C-1.BC.1		C-1.BA.1 female only	Same as C-1.AA.1.	
C-1.BC.2		Same as C-1.BC.1	Same as C-1.AA.2	
C-1.BD.1		C-1.BA.1 ages 6-11	Same as C-1.AA.1.	
C-1.BD.2		Same as C-1.BD.1	Same as C-1.AA.2	
C-1.BE.1		C-1.BA.1 male ages 6-11	Same as C-1.AA.1.	
C-1.BE.2		Same as C-1.BE.1	Same as C-1.AA.2	
C-1.BF.1		C-1.BA.1 female ages 6-11	Same as C-1.AA.1.	
C-1.BF.2		Same as C-1.BF.1	Same as C-1.AA.2	
C-1.BG.1		C-1.BA.1 ages 12-19	Same as C-1.AA.1.	
C-1.BG.2		Same as C-1.BG.1	Same as C-1.AA.2	
C-1.BH.1		C-1.BA.1 male ages 12-19	Same as C-1.AA.1.	
C-1.BH.2		Same as C-1.BH.1	Same as C-1.AA.2	
C-1.BI.1		C-1.BA.1 female ages 12-19	Same as C-1.AA.1.	
C-1.BI.2		Same as C-1.BI.1	Same as C-1.AA.2	
C-1.BJ.1		C-1.BA.1 ages 20-39	Same as C-1.AA.1.	
C-1.BJ.2		Same as C-1.BJ.1	Same as C-1.AA.2	
C-1.BK.1		C-1.BA.1 male ages 20-39	Same as C-1.AA.1.	
C-1.BK.2		Same as C-1.BK.1	Same as C-1.AA.2	
C-1.BL.1		C-1.BA.1 female ages 20-39	Same as C-1.AA.1.	
C-1.BL.2		Same as C-1.BL.1	Same as C-1.AA.2	
C-1.BM.1		C-1.BA.1 ages 40-59	Same as C-1.AA.1.	
C-1.BM.2		Same as C-1.BM.1	Same as C-1.AA.2	
C-1.BN.1		C-1.BA.1 male ages 40-59	Same as C-1.AA.1.	
C-1.BN.2		Same as C-1.BN.1	Same as C-1.AA.2	
C-1.BO.1		C-1.BA.1 female ages 40-59	Same as C-1.AA.1.	
C-1.BO.2		Same as C-1BO.1	Same as C-1.AA.2	
C-1.BP.1		C-1.BA.1 ages 60 and older	Same as C-1.AA.1.	
C-1.BP.2		Same as C-1.BP.1	Same as C-1.AA.2	
C-1.BQ.1		C-1.BA.1 male ages 60 and older	Same as C-1.AA.1.	
C-1.BQ.2		Same as C-1.BQ.1	Same as C-1.AA.2	
C-1.BR.1		C-1.BA.1 female ages 60 and older	Same as C-1.AA.1.	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
C-1.BR.2		Same as C-1.BR.1	Same as C-1.AA.2	
C-1.CA.1		All Active Clinical patients.	Same as C-1.AA.1	
C-1.CA.2		Same as C-1.CA.1	Same as C-1.AA.2	
C-1.CB.1		All male Active Clinical patients.	Same as C-1.AA.1	
C-1.CB.2		Same as C-1.CB.1	Same as C-1.AA.2	
C-1.CC.1		All female Active Clinical patients.	Same as C-1.AA.1	
C-1.CC.2		Same as C-1.CC.1	Same as C-1.AA.2	
C-1.CD.1		All Active Clinical patients ages 6-11	Same as C-1.AA.1	
C-1.CD.2		Same as C-1.CD.1	Same as C-1.AA.2	
C-1.CE.1		All male Active Clinical patients ages 6-11	Same as C-1.AA.1	
C-1.CE.2		Same as C-1.CE.1	Same as C-1.AA.2	
C-1.CF.1		All female Active Clinical patients ages 6-11	Same as C-1.AA.1	
C-1.CF.2		Same as C-1.CF.1	Same as C-1.AA.2	
C-1.CG.1		All Active Clinical patients ages 12-19	Same as C-1.AA.1	
C-1.CG.2		Same as C-1.CG.1	Same as C-1.AA.2	
C-1.CH.1		All male Active Clinical patients ages 12-19	Same as C-1.AA.1	
C-1.CH.2		Same as C-1.CH.1	Same as C-1.AA.2	
C-1.CI.1		All female Active Clinical patients ages 12-19	Same as C-1.AA.1	
C-1.CI.2		Same as C-1.CI.1	Same as C-1.AA.2	
C-1.CJ.1		All Active Clinical patients ages 20-39	Same as C-1.AA.1	
C-1.CJ.2		Same as C-1.CJ.1	Same as C-1.AA.2	
C-1.CK.1		All male Active Clinical patients ages 20-39	Same as C-1.AA.1	
C-1.CK.2		Same as C-1.CK.1	Same as C-1.AA.2	
C-1.CL.1		All female Active Clinical patients ages 20-39	Same as C-1.AA.1	
C-1.CL.2		Same as C-1.CL.1	Same as C-1.AA.2	
C-1.CM.1		All Active Clinical patients ages 40-59	Same as C-1.AA.1	
C-1.CM.2		Same as C-1.CM.1	Same as C-1.AA.2	
C-1.CN.1		All male Active Clinical patients ages 40-59	Same as C-1.AA.1	
C-1.CN.2		Same as C-1.CN.1	Same as C-1.AA.2	
C-1.CO.1		All female Active Clinical patients ages 40-59	Same as C-1.AA.1	
C-1.CO.2		Same as C-1.CO.1	Same as C-1.AA.2	
C-1.CP.1		All Active Clinical patients ages 60 and older	Same as C-1.AA.1	
C-1.CP.2		Same as C-1.CP.1	Same as C-1.AA.2	
C-1.CQ.1		All male Active Clinical patients ages 60 and older	Same as C-1.AA.1	
C-1.CQ.2		Same as C-1.CQ.1	Same as C-1.AA.2	
C-1.CR.1		All female Active Clinical patients ages 60 and older	Same as C-1.AA.1	
C-1.CR.2		Same as C-1.CR.1	Same as C-1.AA.2	
C-2.A.1	Patient Education: Medications	All GPRA User Population patients with Medications dispensed at their facility during the year prior to the end of the Report period.	Patients who were provided patient education about their medications	Denominator: Patients receiving medications are identified by any entry in the VMed file for your facility. □ Numerator: PFE code of M-I (medication information); M-DI (Drug interaction); M-FU (Medication follow up); M-L (Medication patient information literature) or any PFE code containing "-M".
C-2.B.1		All Active Clinical patients with Medications dispensed at their facility during the year prior to the end of the Report period.	Same as C-3.A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
D.A.1	Cholesterol Screening	All GPRA User Population patients ages 23 through 65, broken down by gender.	Any patient in the denominator with evidence of having a cholesterol screening at some time during the past five years. <input type="checkbox"/> <input type="checkbox"/> Break down by gender.	Denominator: ages counted at the beginning of the Report period. Since the recommendation is to screen once every five years, patient records for ages 18 through 65 will be reviewed. <input type="checkbox"/> <input type="checkbox"/> Numerator: Counts all Y instances reported, regardless of the results of the measurement. <input type="checkbox"/> <input type="checkbox"/> Finds any test meeting the criteria done in the five years prior to the end of the Report period. <input type="checkbox"/> POV diagnosis: V77.91, screening for lipid disorders <input type="checkbox"/> CPT codes: 80061 (lipid panel); 82465 (Total Cholesterol) <input type="checkbox"/> <input type="checkbox"/> The following taxonomies must be created and populated in order for this data in this indicator to be accurate: 1) DM AUDIT LDL CHOLESTEROL TAX – must contain all LDL lab tests 2) DM AUDIT CHOLESTEROL TAX 2) DM AUDIT LIPID PROFILE TAX – must contain the Lipid Profile tests
D.B.1		All male GPRA User Population patients ages 23 through 65.		
D.C.1		All female GPRA User Population patients ages 23 through 65.		
D.D.1		All Active Clinical patients ages 23 through 65, broken down by gender.	Same as D.A.1	
D.E.1		All male Active Clinical patients ages 23 through 65		
D.F.1		All female Active Clinical patients ages 23 through 65		
E-1.A.1	HIV Quality of Care	GPRA User Population patients ages 13 and older with at least 2 visits within last year with HIV diagnosis, one of which must in the last 6 months.	Numerator 1: received CD4 test only (without PCR viral load) in the past year	Denominator: ages at beginning of Report period. Patient must have POV or Problem List codes 042.0-044.9, V08, or 795.71 <input type="checkbox"/> <input type="checkbox"/> Numerator: Lab test CD4 count: 86361 i (and taxonomy)
E-1.A.2		Same as E.A.1	Numerator 2: received PCR viral load only (without CD4) in the past year	PCR viral load: 87536, 87539 (and taxonomy)
E-1.A.3		Same as E.A.1	Numerator 3: received both CD4 and PCR viral load in the past year	
E-1.B.1		Male GPRA User Population patients ages 13 and older with 2 visits within last year with HIV diagnosis AND one of the two HIV-related visit in last 6 months.	Same as E.A.1	
E-1.B.2		Same as E.B.1	Same as E.A.2	
E-1.B.3		Same as E.B.1	Same as E.A.3	
E-1.C.1		Female GPRA User Population patients ages 13 and older with 2 visits within last year with HIV diagnosis AND one of the two HIV-related visit in last 6 months.	Same as E.A.1	
E-1.C.2		Same as E.C.1	Same as E.A.2	
E-1.C.3		Same as E.C.1	Same as E.A.3	
E-1.D.1		All patients ages 13 and older with 2 visits within the service area (i.e., not Contract paid for) in the year prior to the end of the Report period with HIV POV, including 1 HIV POV in last 6 months.	Numerator 1: received CD4 test only (without PCR viral load) in the past year	Denominator: ages at beginning of Report period. Patient must have POV or Problem List codes 042.0-044.9, V08, or 795.71 <input type="checkbox"/> <input type="checkbox"/> Numerator: Lab test CD4 count: 86361 i (and taxonomy)
E-1.D.2		Same as E.D.1	Numerator 2: received PCR viral load only (without CD4) in the past year	PCR viral load: 87536, 87539 (and taxonomy)
E-1.D.3		Same as E.D.1	Numerator 3: received both CD4 and PCR viral load in the past year	
E-1.E.1		Male Active Clinical patients ages 13 and older with 2 visits within last year with HIV diagnosis AND 1 HIV-related visit in last 6 months.	Same as E.A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
E-1.E.2		Same as E.E.1	Same as E.A.2	
E-1.E.3		Same as E.E.1	Same as E.A.3	
E-1.F.1		Female Active Clinical patients ages 13 and older with 2 visits within last year with HIV diagnosis AND 1 HIV-related visit in last 6 months.	Same as E.A.1	
E-1.F.2		Same as E.F.1	Same as E.A.2	
E-1.F.3		Same as E.F.1	Same as E.A.3	
E-2.A.1	Prenatal HIV Testing and Education	All female GPRA User Population patients ages 18-40 with no recorded HIV diagnosis and with at least two prenatal visits during the year prior to the end of the Report period, one of which must be the first prenatal visit.	Numerator 1: Patients who received HIV test during the year prior to the end of the Report period, to include refusals	Denominator: No POV or Problem List codes 042.0-044.9, V08, or 795.71. At least two visits with POV or Problem diagnosis (V22.0-V23.9, 640-648, 651-676) during the year prior to the end of the Report period. One diagnosis must be V.22.0 (first prenatal visit) □ Age calculated at the beginning of the Report period. □ □ Numerator: HIV test taxonomy, to include antibody: 86689, 86701-86703, confirmatory test 86689, antigen 87390, 87391
E-2.A.2		Same as E-2.A.1	Numerator 1A: of Numerator 1, number of refusals	
E-2.A.3		Same as E-2.A.1	Numerator 2: Patients who were provided with patient education about HIV.	Numerator: Based on patient education codes containing "HIV" or contains HIV diagnosis 042.0-044.9, V08, 795.71
E-2.B.1		All pregnant female patients ages 18-40, defined as at least two prenatal visits during the year prior to the end of the Report period, one of which must be the first prenatal visit, and with no recorded HIV diagnosis diagnosis in POV or problem list.	Numerator 1: Patients who received HIV test during the year prior to the end of the Report period, to include refusals	Denominator: No POV or Problem List codes 042.0-044.9, V08, or 795.71. At least two visits with POV or Problem diagnosis (V22.0-V23.9, 640-648, 651-676) during the year prior to the end of the Report period. One diagnosis must be V.22.0 (first prenatal visit) □ Age calculated at the beginning of the Report period. □ □ Numerator: HIV test taxonomy, to include antibody: 86689, 86701-86703, confirmatory test 86689, antigen 87390, 87391
E-2.B.2		Same as E-2.B.1	Numerator 1A: of Numerator 1, number of refusals	
E-2.B.3		Same as E-2.B.1	Numerator 2: Patients who were provided with patient education about HIV.	Numerator: Based on patient education codes containing "HIV" or contains HIV diagnosis 042.0-044.9, V08, 795.71
F.A.1	Domestic Violence Screening	Female GPRA User Population patients ages 25 to 40 at beginning of Report period	Patients screened for domestic violence at any time in the year prior to the end of the Report period. Screening is broadly defined as either a domestic violence Health Factor or patient education code recorded.	Denominator: ages at beginning of Report period. □ Numerator: any Domestic Violence health factors (TBD) or Patient Education codes containing "DV."
F.A.2		Same as F.A.1	Patients screened for domestic violence in past year with health factors (subset of Numerator 1)	Denominator: ages at beginning of Report period. □ Numerator: any Domestic Violence health factors: DV +, DV -, DV ? (patient denies but provider suspects), DV U (unable to screen)
F.A.3		Same as F.A.1	Patients with no DV health factors but who received any education topic about Domestic Violence (subset of Numerator 1)	Numerator: no DV health factors but Patient Education codes containing "DV."
F.B.1		Female Active Clinical patients ages 25 to 40.	Same as F.A.1	
F.B.2		Same as F.B.2	Same as F.A.2	
F.B.3		Same as F.B.2	Same as F.A.3	
G.A.1	Alcohol Screening (FAS Prevention)	Female GPRA User Population patients ages 25 to 40 at beginning of Report period.	Patients who have received alcohol screen in the past year	Denominator: ages at the beginning of the Report period. □ Numerator: Health Factors and codes to be defined
G.B.1		Female Active Clinical patients ages 25 to 40 at beginning of Report period.	Same as G.A.1	
H.AA.1	Tobacco Use and Exposure to second hand smoke	All GPRA User Population patients.	Numerator 1: Patients who have been screened for tobacco use with any Tobacco health factor in the year prior to the end of the Report period.	Any health factor for category Tobacco documented in past year
H.AA.2		Same as H.AA.1	Numerator 2: Patients identified as current tobacco users with either Health Factors or diagnosis, both smokers and smokeless users.	Any of the following within the year prior to the end of the Report period: □ 1. Health Factors: Current Smoker, Current Smokeless, Current Smoker and Smokeless □ 2. Diagnosis codes 305.1* or V15.82

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.AA.3		Same as H.AA.1	Numerator 3 (subset of Numerator 2): Patients identified as current smokers in the past year.	1. Health Factors: CURRENT SMOKER or CURRENT SMOKER AND SMOKELESS 2. Diagnosis codes 305.1* or V15.82
H.AA.4		Same as H.AA.1	Numerator 4 (subset of Numerator 2): Patients identified as current smokeless tobacco users with either Health Factors or diagnosis in the past year	Health Factors: CURRENT SMOKELESS or CURRENT SMOKER AND SMOKELESS
H.AA.5		GPRA User Population patients who are current tobacco users.	Numerator 5: Patients identified as tobacco users (Numerator 2) who have received tobacco cessation counseling in the past year, using clinic and patient education codes.	Denominator: Numerator 2 Numerator: PFE codes TO-QU (tobacco quit), TO-LA (tobacco lifestyle adaptation); or clinic code 94 (tobacco cessation clinic)
H.AA.6		Same as H.AA.1	Numerator 6: Patients identified as exposed to environmental tobacco smoke (ETS) (second hand smoke) with either Health Factors or diagnosis in the past year.	Health Factor SMOKER IN HOME or EXPOSURE TO ENVIRONMENTAL TOBACCO SMOKE
H.AB.1		All male GPRA User Population patients.	Same as H.AA.1	
H.AB.2		Same as H.AB.1	Same as H.AA.2	
H.AB.3		Same as H.AB.1	Same as H.AA.3	
H.AB.4		Same as H.AB.1	Same as H.AA.4	
H.AB.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AB.6		Same as H.AB.1	Same as H.AA.6	
H.AC.1		All female GPRA User Population patients.	Same as H.AA.1	
H.AC.2		Same as H.AC.1	Same as H.AA.2	
H.AC.3		Same as H.AC.1	Same as H.AA.3	
H.AC.4		Same as H.AC.1	Same as H.AA.4	
H.AC.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AC.6		Same as H.AC.1	Same as H.AA.6	
H.AD.1		All GPRA User Pop patients ages 5-13	Same as H.AA.1	1. Any health factor for tobacco (0001-0006, 023-025, 030, 031) documented in past year 2. 305.1 3. V15.82
H.AD.2		Same as H.AD.1	Same as H.AA.2	Any of the following within the year prior to the end of the Report period: 1. Health Factor 0002 CURRENT SMOKER 2. smoking-related diagnoses 305.1 3. V15.82
H.AD.3		Same as H.AD.1	Same as H.AA.3	Health Factor 0006 SMOKER IN HOME
H.AD.4		Same as H.AD.1	Same as H.AA.4	
H.AD.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AD.6		Same as H.AD.1	Same as H.AA.6	
H.AE.1		All male GPRA User Pop patients ages 5-13	Same as H.AA.1	
H.AE.2		Same as H.AE.1	Same as H.AA.2	
H.AE.3		Same as H.AE.1	Same as H.AA.3	
H.AE.4		Same as H.AE.1	Same as H.AA.4	
H.AE.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AE.6		Same as H.AE.1	Same as H.AA.6	
H.AF.1		All female GPRA User Pop patients ages 5-13	Same as H.AA.1	
H.AF.2		Same as H.AF.1	Same as H.AA.2	
H.AF.3		Same as H.AF.1	Same as H.AA.3	
H.AF.4		Same as H.AF.1	Same as H.AA.4	
H.AF.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AF.6		Same as H.AF.1	Same as H.AA.6	
H.AG.1		All GPRA User Population Patients ages 14-17.	Same as H.AA.1	
H.AG.2		Same as H.AG.1	Same as H.AA.2	
H.AG.3		Same as H.AG.1	Same as H.AA.3	
H.AG.4		Same as H.AG.1	Same as H.AA.4	
H.AG.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AG.6		Same as H.AG.1	Same as H.AA.6	
H.AH.1		All male GPRA User Population Patients ages 14-17.	Same as H.AA.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.AH.2		Same as H.AH.1	Same as H.AA.2	
H.AH.3		Same as H.AH.1	Same as H.AA.3	
H.AH.4		Same as H.AH.1	Same as H.AA.4	
H.AH.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AH.6		Same as H.AH.1	Same as H.AA.6	
H.AI.1		All female GPRA User Population Patients ages 14-17.	Same as H.AA.1	
H.AI.2		Same as H.AI.1	Same as H.AA.2	
H.AI.3		Same as H.AI.1	Same as H.AA.3	
H.AI.4		Same as H.AI.1	Same as H.AA.4	
H.AI.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AI.6		Same as H.AI.1	Same as H.AA.6	
H.AJ.1		All GPRA User Population patients ages 18-24.	Same as H.AA.1	
H.AJ.2		Same as H.AJ.1	Same as H.AA.2	
H.AJ.3		Same as H.AJ.1	Same as H.AA.3	
H.AJ.4		Same as H.AJ.1	Same as H.AA.4	
H.AJ.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AJ.6		Same as H.AJ.1	Same as H.AA.6	
H.AK.1		All male GPRA User Population patients ages 18-24.	Same as H.AA.1	
H.AK.2		Same as H.AK.1	Same as H.AA.2	
H.AK.3		Same as H.AK.1	Same as H.AA.3	
H.AK.4		Same as H.AK.1	Same as H.AA.4	
H.AK.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AK.6		Same as H.AK.1	Same as H.AA.6	
H.AL.1		All female GPRA User Population patients ages 18-24.	Same as H.AA.1	
H.AL.2		Same as H.AL.1	Same as H.AA.2	
H.AL.3		Same as H.AL.1	Same as H.AA.3	
H.AL.4		Same as H.AL.1	Same as H.AA.4	
H.AL.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AL.6		Same as H.AL.1	Same as H.AA.6	
H.AM.1		All GPRA User Population patients ages 25-44 □	Same as H.AA.1	
H.AM.2		Same as H.AM.1	Same as H.AA.2	
H.AM.3		Same as H.AM.1	Same as H.AA.3	
H.AM.4		Same as H.AM.1	Same as H.AA.4	
H.AM.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AM.6		Same as H.AM.1	Same as H.AA.6	
H.AN.1		All male GPRA User Population patients ages 25-44	Same as H.AA.1	
H.AN.2		Same as H.AN.1	Same as H.AA.2	
H.AN.3		Same as H.AN.1	Same as H.AA.3	
H.AN.4		Same as H.AN.1	Same as H.AA.4	
H.AN.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AN.6		Same as H.AN.1	Same as H.AA.6	
H.AO.1		All female GPRA User Population patients ages 25-44	Same as H.AA.1	
H.AO.2		Same as H.AO.1	Same as H.AA.2	
H.AO.3		Same as H.AO.1	Same as H.AA.3	
H.AO.4		Same as H.AO.1	Same as H.AA.4	
H.AO.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AO.6		Same as H.AO.1	Same as H.AA.6	
H.AP.1		All GPRA User Population patients ages 45-64	Same as H.AA.1	
H.AP.2		Same as H.AP.1	Same as H.AA.2	
H.AP.3		Same as H.AP.1	Same as H.AA.3	
H.AP.4		Same as H.AP.1	Same as H.AA.4	
H.AP.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AP.6		Same as H.AP.1	Same as H.AA.6	
H.AQ.1		All male GPRA User Population patients ages 45-64	Same as H.AA.1	
H.AQ.2		Same as H.AQ.1	Same as H.AA.2	
H.AQ.3		Same as H.AQ.1	Same as H.AA.3	
H.AQ.4		Same as H.AQ.1	Same as H.AA.4	
H.AQ.5		Numerator 2 (tobacco users)	Same as H.AA.4	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.AQ.6		Same as H.AQ.1	Same as H.AA.6	
H.AR.1		All female GPRA User Population patients ages 45-64	Same as H.AA.1	
H.AR.2		Same as H.AR.1	Same as H.AA.2	
H.AR.3		Same as H.AR.1	Same as H.AA.3	
H.AR.4		Same as H.AR.1	Same as H.AA.4	
H.AR.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AR.6		Same as H.AR.1	Same as H.AA.6	
H.AS.1		All GPRA User Population patients ages over 64	Same as H.AA.1	
H.AS.2		Same as H.AS.1	Same as H.AA.2	
H.AS.3		Same as H.AS.1	Same as H.AA.3	
H.AS.4		Same as H.AS.1	Same as H.AA.4	
H.AS.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AS.6		Same as H.AS.1	Same as H.AA.6	
H.AT.1		All male GPRA User Population patients ages over 64	Same as H.AA.1	
H.AT.2		Same as H.AT.1	Same as H.AA.2	
H.AT.3		Same as H.AT.1	Same as H.AA.3	
H.AT.4		Same as H.AT.1	Same as H.AA.4	
H.AT.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AT.6		Same as H.AT.1	Same as H.AA.6	
H.AU.1		All female GPRA User Population patients ages over 64	Same as H.AA.1	
H.AU.2		Same as H.AU.1	Same as H.AA.2	
H.AU.3		Same as H.AU.1	Same as H.AA.3	
H.AU.4		Same as H.AU.1	Same as H.AA.4	
H.AU.5		Numerator 2 (tobacco users)	Same as H.AA.4	
H.AU.6		Same as H.AU.1	Same as H.AA.6	
H.BA.1		All Active Clinical patients	Same as H.AA.1	
H.BA.2		Same as H.BA.1	Same as H.AA.2	
H.BA.3		Same as H.BA.1	Same as H.AA.3	
H.BA.4		Same as H.BA.1	Same as H.AA.4	
H.BA.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BA.6		Same as H.BA.1	Same as H.AA.6	
H.BB.1		All male Active Clinical patients	Same as H.AA.1	
H.BB.2		Same as H.BB.1	Same as H.AA.2	
H.BB.3		Same as H.BB.1	Same as H.AA.3	
H.BB.4		Same as H.BB.1	Same as H.AA.4	
H.BB.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BB.6		Same as H.BB.1	Same as H.AA.6	
H.BC.1		All female Active Clinical patients	Same as H.AA.1	
H.BC.2		Same as H.BC.1	Same as H.AA.2	
H.BC.3		Same as H.BC.1	Same as H.AA.3	
H.BC.4		Same as H.BC.1	Same as H.AA.4	
H.BC.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BC.6		Same as H.BC.1	Same as H.AA.6	
H.BD.1		All Active Clinical patients ages 5-13	Same as H.AA.1	
H.BD.2		Same as H.BD.1	Same as H.AA.2	
H.BD.3		Same as H.BD.1	Same as H.AA.3	
H.BD.4		Same as H.BD.1	Same as H.AA.4	
H.BD.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BD.6		Same as H.BD.1	Same as H.AA.6	
H.BE.1		All male Active Clinical patients ages 5-13	Same as H.AA.1	
H.BE.2		Same as H.BE.1	Same as H.AA.2	
H.BE.3		Same as H.BE.1	Same as H.AA.3	
H.BE.4		Same as H.BE.1	Same as H.AA.4	
H.BE.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.BE.6		Same as H.BE.1	Same as H.AA.6	
H.BF.1		All female Active Clinical patients ages 5-13	Same as H.AA.1	
H.BF.2		Same as H.BF.1	Same as H.AA.2	
H.BF.3		Same as H.BF.1	Same as H.AA.3	
H.BF.4		Same as H.BF.1	Same as H.AA.4	
H.BF.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BF.6		Same as H.BF.1	Same as H.AA.6	
H.BG.1		All Active Clinical Patients ages 14-17.	Same as H.AA.1	
H.BG.2		Same as H.BG.1	Same as H.AA.2	
H.BG.3		Same as H.BG.1	Same as H.AA.3	
H.BG.4		Same as H.BG.1	Same as H.AA.4	
H.BG.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BG.6		Same as H.BG.1	Same as H.AA.6	
H.BH.1		All male Active Clinical Patients ages 14-17.	Same as H.AA.1	
H.BH.2		Same as H.BG.1	Same as H.AA.2	
H.BH.3		Same as H.BG.1	Same as H.AA.3	
H.BH.4		Same as H.BH.1	Same as H.AA.4	
H.BH.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BH.6		Same as H.BH.1	Same as H.AA.6	
H.BI.1		All female Active Clinical Patients ages 14-17.	Same as H.AA.1	
H.BI.2		Same as H.BI.1	Same as H.AA.2	
H.BI.3		Same as H.BI.1	Same as H.AA.3	
H.BI.4		Same as H.BI.1	Same as H.AA.4	
H.BI.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BI.6		Same as H.BI.1	Same as H.AA.6	
H.BJ.1		All Active Clinical patients ages 18-24.	Same as H.AA.1	
H.BJ.2		Same as H.BJ.1	Same as H.AA.2	
H.BJ.3		Same as H.BJ.1	Same as H.AA.3	
H.BJ.4		Same as H.BJ.1	Same as H.AA.4	
H.BJ.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BJ.6		Same as H.BJ.1	Same as H.AA.6	
H.BK.1		All male Active Clinical patients ages 18-24.	Same as H.AA.1	
H.BK.2		Same as H.BK.1	Same as H.AA.2	
H.BK.3		Same as H.BK.1	Same as H.AA.3	
H.BK.4		Same as H.BK.1	Same as H.AA.4	
H.BK.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BK.6		Same as H.BK.1	Same as H.AA.6	
H.BL.1		All female Active Clinical patients ages 18-24.	Same as H.AA.1	
H.BL.2		Same as H.BL.1	Same as H.AA.2	
H.BL.3		Same as H.BL.1	Same as H.AA.3	
H.BL.4		Same as H.BL.1	Same as H.AA.4	
H.BL.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BL.6		Same as H.BL.1	Same as H.AA.6	
H.BM.1		All Active Clinical patients ages 25-44	Same as H.AA.1	
H.BM.2		Same as H.BM.1	Same as H.AA.2	
H.BM.3		Same as H.BM.1	Same as H.AA.3	
H.BM.4		Same as H.BM.1	Same as H.AA.4	
H.BM.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BM.6		Same as H.BM.1	Same as H.AA.6	
H.BN.1		All male Active Clinical patients ages 25-44	Same as H.AA.1	
H.BN.2		Same as H.BN.1	Same as H.AA.2	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.BN.3		Same as H.BN.1	Same as H.AA.3	
H.BN.4		Same as H.BN.1	Same as H.AA.4	
H.BN.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BN.6		Same as H.BN.1	Same as H.AA.6	
H.BO.1		All female Active Clinical patients ages 25-44	Same as H.AA.1	
H.BO.2		Same as H.BO.1	Same as H.AA.2	
H.BO.3		Same as H.BO.1	Same as H.AA.3	
H.BO.4		Same as H.BO.1	Same as H.AA.4	
H.BO.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BO.6		Same as H.BO.1	Same as H.AA.6	
H.BP.1		All Active Clinical patients ages 35-54	Same as H.AA.1	
H.BP.2		Same as H.BP.1	Same as H.AA.2	
H.BP.3		Same as H.BP.1	Same as H.AA.3	
H.BP.4		Same as H.BP.1	Same as H.AA.4	
H.BP.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BP.6		Same as H.BP.1	Same as H.AA.6	
H.BQ.1		All male Active Clinical patients ages 35-54	Same as H.AA.1	
H.BQ.2		Same as H.BQ.1	Same as H.AA.2	
H.BQ.3		Same as H.BQ.1	Same as H.AA.3	
H.BQ.4		Same as H.BQ.1	Same as H.AA.4	
H.BQ.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BQ.6		Same as H.BQ.1	Same as H.AA.6	
H.BR.1		All female Active Clinical patients ages 35-54	Same as H.AA.1	
H.BR.2		Same as H.BR.1	Same as H.AA.2	
H.BR.3		Same as H.BR.1	Same as H.AA.3	
H.BR.4		Same as H.BR.1	Same as H.AA.4	
H.BR.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BR.6		Same as H.BR.1	Same as H.AA.6	
H.BS.1		All Active Clinical patients ages over 64	Same as H.AA.1	
H.BS.2		Same as H.BS.1	Same as H.AA.2	
H.BS.3		Same as H.BS.1	Same as H.AA.3	
H.BS.4		Same as H.BS.1	Same as H.AA.4	
H.BS.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BS.6		Same as H.BS.1	Same as H.AA.6	
H.BT.1		All male Active Clinical patients ages over 64	Same as H.AA.1	
H.BT.2		Same as H.BT.1	Same as H.AA.2	
H.BT.3		Same as H.BT.1	Same as H.AA.3	
H.BT.4		Same as H.BT.1	Same as H.AA.4	
H.BT.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BT.6		Same as H.BT.1	Same as H.AA.6	
H.BU.1		All female Active Clinical patients ages over 64	Same as H.AA.1	
H.BU.2		Same as H.BU.1	Same as H.AA.2	
H.BU.3		Same as H.BU.1		
H.BU.4		Same as H.BU.1	Same as H.AA.4	
H.BU.5		Active Clinical patients who are tobacco users (Numerator 2)	Same as H.AA.5	
H.BU.6		Same as H.BU.1	Same as H.AA.6	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
H.CA.1		Pregnant women 18-49 from GPRA User Population	Same as H.AA.1	Denominator: Age at beginning of report period. Pregnancy or prenatal diagnosis during the year prior to the end of the Report period OR patient education code "PN" in past year. At least two visits with POV or Problem diagnosis (V22.0-V23.9, 640-648, 651-676) during the year prior to the end of the Report period. One diagnosis must be V.22.0 (first prenatal visit). Age calculated at the beginning of the Report period.
H.CA.2		Same as H.CA.1	Same as H.AA.2	
H.CA.3		Same as H.CA.1	Same as H.AA.3	
H.CA.4		Same as H.CA.1	Same as H.AA.4	
H.CA.5		Pregnant women 18-49 from GPRA User Population identified as current tobacco users. (Numerator 2)	Same as H.AA.5	Denominator: Age at beginning of report period. Pregnancy or prenatal diagnosis during the year prior to the end of the Report period OR patient education code "PN" in past year. AND Health Factor 0002 CURRENT SMOKER or 0003 CURRENT SMOKELESS; smoking-related POV diagnosis 305.1 Tobacco Use Disorder; V15.82 History of Tobacco Use
H.CA.6		Same as H.CA.1	Same as H.AA.6	
H.DA.1		Pregnant women ages 18-49 at beginning of Report period, defined as at least two visits with pregnancy POV or Problem diagnosis during the year prior to the end of the Report period, with first prenatal visit as at least one diagnosis.	Same as H.AA.1	Denominator: Age calculated at beginning of report period. At least two visits with POV or Problem diagnosis (V22.0-V23.9, 640.*-648.*, 651.*-676.*) during the year prior to the end of the Report period. One diagnosis must be V22.0 (first prenatal visit).
H.DA.2		Same as H.DA.1	Same as H.AA.2	
H.DA.3		Same as H.DA.1	Same as H.AA.3	
H.DA.4		Same as H.DA.1	Same as H.AA.4	
H.DA.5		Pregnant women 18-49 from Active Clinical patient population identified as tobacco users (Numerator 2).	Same as H.AA.5	Denominator: Age at beginning of report period. Pregnancy or prenatal diagnosis during the year prior to the end of the Report period OR patient education code "PN" in past year. AND Health Factor 0002 CURRENT SMOKER or 0003 CURRENT SMOKELESS; smoking-related POV diagnosis 305.1 Tobacco Use Disorder; V15.82 History of Tobacco Use
H.DA.6		Same as H.DA.1	Same as H.AA.6	
I.A.1	Asthma	All GPRA User Population patients, broken down into three age groups: under 5; 5 to 64; and 65 and older.	Patients who have been diagnosed with asthma ever and have had two asthma-related visits in the year prior to the end of the Report period.	Denominator: ages at beginning of Report period. □ Numerator: 2 visits in past year with POV codes 493.*
I.A.2		Same as I.A.1	Patients who have been hospitalized at any hospital for asthma in the year prior to the end of the Report period.	Numerator: Admission diagnosis 493.*
I.B.1		All GPRA User Population patients under age 5.	Same as I.A.1	Denominator: ages at beginning of Report period. □ Numerator: 2 visits in past year with POV or problem list codes 493.*
I.B.2		Same as I.B.1	Same as I.A.2	Numerator: Admission diagnosis 493.*
I.C.1		All GPRA User Population patients ages 5-64	Same as I.A.1	
I.C.2		Same as I.C.1	Same as I.A.2	
I.D.1		All GPRA User Population patients ages 65 and older	Same as I.A.1	
I.D.2		Same as I.D.1	Same as I.A.2	
I.E.1		All Active Clinical users.	Same as I.A.1	
I.E.2		Same as I.E.1	Same as I.A.2	
I.F.1		All Active Clinical users under age 5.	Same as I.A.1	
I.F.2		Same as I.F.1	Same as I.A.2	
I.G.1		All Active Clinical users ages 5 to 64.	Same as I.A.1	
I.G.2		Same as I.G.1	Same as I.A.2	
I.H.1		All Active Clinical users ages 65 and older.	Same as I.A.1	
I.H.2		Same as I.H.1	Same as I.A.2	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-1.A.1	Cardiovascular-Disease: Lipids-Assessment	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Numerator 1: Number of patients with a LIPID PROFILE OR having an LDL and HDL and Triglyceride (TG) (all three), whether or not the test had a valid result.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) □ □ Numerator: same as 4A.1. For each numerator, counts all Y-instances reported, regardless of the results of the measurement. Finds the last test done in the year prior to the end of the Report period for each of the tests described in the numerator. □ —The following taxonomies must be created and populated in order for this data in this indicator to be accurate: 1) DM-AUDIT LDL-CHOLESTEROL TAX—must contain all LDL lab tests □ 2) DM-AUDIT TRIGLYCERIDE TAX—must contain all Triglyceride tests □ 3) DM-AUDIT LIPID PROFILE TAX—must contain the Lipid Profile tests □ 4) DM-AUDIT HDL TAX—must contain the HDL Cholesterol lab tests □ □ For the following tests, CPT codes are also searched for and used as a hit: □ 1) Lipid Profile : 80061 □ 2) Triglyceride: 84478 □ 3) LDL: 80064
J-1.A.2		Same as J-1.A.1	Numerator 2: Patients with LDL <= 100	
J-1.A.3		Same as J-1.A.1	Numerator 3: Patients with LDL 101-130	
J-1.A.4		Same as J-1.A.1	Numerator 4: Patients with LDL 131-160	
J-1.A.5		Same as J-1.A.1	Numerator 5: Patients with LDL > 160	
J-1.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-1.A.1	
J-1.B.2		Same as J-1.B.1	Same as J-1.A.2	
J-1.B.3		Same as J-1.B.1	Same as J-1.A.3	
J-1.B.4		Same as J-1.B.1	Same as J-1.A.4	
J-1.B.5		Same as J-1.B.1	Same as J-1.A.5	
J-1.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-1.A.1	
J-1.C.2		Same as J-1.C.1	Same as J-1.A.2	
J-1.C.3		Same as J-1.C.1	Same as J-1.A.3	
J-1.C.4		Same as J-1.C.1	Same as J-1.A.4	
J-1.C.5		Same as J-1.C.1	Same as J-1.A.5	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-1.D.1		All patients diagnosed with cardiac disease, defined as at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (410.0-412.* or 414.0-414.9). Broken down by gender.	Numerator 1: Number of patients with a LIPID PROFILE OR having an LDL and HDL and Triglyceride (TG) (all three), whether or not the test had a valid result.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: same as 4A.1. For each numerator, counts all Y instances reported, regardless of the results of the measurement. Finds the last test done in the year prior to the end of the Report period for each of the tests described in the numerator. <input type="checkbox"/> The following taxonomies must be created and populated in order for this data in this indicator to be accurate: 1) DM AUDIT LDL CHOLESTEROL TAX – must contain all LDL lab tests <input type="checkbox"/> 2) DM AUDIT TRIGLYCERIDE TAX – must contain all Triglyceride tests <input type="checkbox"/> 3) DM AUDIT LIPID PROFILE TAX – must contain the Lipid Profile tests <input type="checkbox"/> 4) DM AUDIT HDL TAX – must contain the HDL Cholesterol lab tests <input type="checkbox"/> <input type="checkbox"/> For the following tests, CPT codes are also searched for and used as a hit: <input type="checkbox"/> 1) Lipid Profile : 80061 <input type="checkbox"/> 2) Triglyceride: 84478 <input type="checkbox"/> 3) LDL: 80061
J-1.D.2		Same as J-1.D.1	Numerator 2: Patients with LDL <= 100	
J-1.D.3		Same as J-1.D.1	Numerator 3: Patients with LDL 101-130	
J-1.D.4		Same as J-1.D.1	Numerator 4: Patients with LDL 131-160	
J-1.D.5		Same as J-1.D.1	Numerator 5: Patients with LDL > 160	
J-1.E.1		All male Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-1.A.1	
J-1.E.2		Same as J-1.E.1	Same as J-1.A.2	
J-1.E.3		Same as J-1.E.1	Same as J-1.A.3	
J-1.E.4		Same as J-1.E.1	Same as J-1.A.4	
J-1.E.5		Same as J-1.E.1	Same as J-1.A.4	
J-1.F.1		All female Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-1.A.1	
J-1.F.2		Same as J-1.F.1	Same as J-1.A.2	
J-1.F.3		Same as J-1.F.1	Same as J-1.A.3	
J-1.F.4		Same as J-1.F.1	Same as J-1.A.4	
J-1.F.5		Same as J-1.F.1	Same as J-1.A.4	
J-2.A.1	Cardiovascular- Disease: Hypertension	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as 30-2.A.1. Numerator 1: Number of patients with optimal BP. The mean systolic value is equal to or less than 130 AND the mean diastolic value is equal to or less than 85.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: Same as 30-2.A.1. For each of the numerators, uses the last 2 Blood Pressures documented on non-ER visits for the patient in the year prior to the end of the Report period. The mean Systolic value is calculated by adding the last 2 systolic values and dividing by 2. The mean Diastolic value is calculated by adding the diastolic values from the last 2 blood pressures and dividing by 2. If there are less than 2 blood pressures during the past year, the patient will be categorized as undetermined.

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-2.A.2		Same as J-2.A.1	Same as 30-2.A.2. Numerator 2: Number of patients with controlled BP. The mean systolic value is greater than 130 and equal to or less than 139 AND the mean diastolic value is greater than 85 and equal to or less than 90.	
J-2.A.3		Same as J-2.A.1	Same as 30-2.A.3. Numerator 3: Number of patients with uncontrolled BP. The mean systolic value is greater than 139 and equal to or less than 159 AND the mean diastolic value is greater than 90 and equal to or less than 100.	
J-2.A.4		Same as J-2.A.1	Same as 30-2.A.4. Numerator 4: Number of patients with severe uncontrolled BP. The mean systolic value is greater than 159 AND the mean diastolic value is greater than 100.	
J-2.A.5		Same as J-2.A.1	Same as 30-2.A.5. Numerator 5: Number of patients with undetermined BP	
J-2.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-2.A.1	
J-2.B.2		Same as J-2.B.1	Same as J-2.A.2	
J-2.B.3		Same as J-2.B.1	Same as J-2.A.3	
J-2.B.4		Same as J-2.B.1	Same as J-2.A.4	
J-2.B.5		Same as J-2.B.1	Same as J-2.A.5	
J-2.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-2.A.1	
J-2.C.2		Same as J-2.C.1	Same as J-2.A.2	
J-2.C.3		Same as J-2.C.1	Same as J-2.A.3	
J-2.C.4		Same as J-2.C.1	Same as J-2.A.4	
J-2.C.5		Same as J-2.C.1	Same as J-2.A.5	
J-2.D.1		All Active Clinical patients diagnosed with cardiac disease in the past year.	Numerator 1: Number of patients with optimal BP. The mean systolic value is equal to or less than 130 AND the mean diastolic value is equal to or less than 85.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: Same as 30-2.A.1. For each of the numerators, uses the last 2 Blood Pressures documented on non-ER visits for the patient in the year prior to the end of the Report period. The mean Systolic value is calculated by adding the last 2 systolic values and dividing by 2. The mean Diastolic value is calculated by adding the diastolic values from the last 2 blood pressures and dividing by 2. If there are less than 2 blood pressures during the past year, the patient will be categorized as undetermined. If the systolic and diastolic values do not BOTH meet one of the four categories listed above, then the value that is least controlled determines the category.
J-2.D.2		Same as J-2.D.1	Numerator 2: Number of patients with controlled BP. The mean systolic value is greater than 130 and equal to or less than 139 AND the mean diastolic value is greater than 85 and equal to or less than 90.	
J-2.D.3		Same as J-2.D.1	Numerator 3: Number of patients with uncontrolled BP. The mean systolic value is greater than 139 and equal to or less than 159 AND the mean diastolic value is greater than 90 and equal to or less than 100.	
J-2.D.4		Same as J-2.D.1	Numerator 4: Number of patients with severe uncontrolled BP. The mean systolic value is greater than 159 AND the mean diastolic value is greater than 100.	
J-2.D.5		Same as J-2.D.1	Numerator 5: Number of patients with undetermined BP	
J-2.E.1		All male Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-2.A.1	
J-2.E.2		Same as J-2.E.1	Same as J-2.A.2	
J-2.E.3		Same as J-2.E.1	Same as J-2.A.3	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-2.E.4		Same as J-2.E.1	Same as J-2.A.4	
J-2.E.5		Same as J-2.E.1	Same as J-2.A.5	
J-2.F.1		All female Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-2.A.1	
J-2.F.2		Same as J-2.F.1	Same as J-2.A.2	
J-2.F.4		Same as J-2.F.1	Same as J-2.A.3	
J-2.F.5		Same as J-2.F.1	Same as J-2.A.4	
J-2.F.30		Same as J-2.F.1	Same as J-2.A.5	
J-3.A.1	Cardiovascular Disease Prevention: Tobacco Use Rate	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Numerator 1: Patients who have been screened for tobacco use in past year.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) □ Numerator: Any of the following have been documented in the past year: □ 1. Any health factor for tobacco use (F001-F006, F023-F025 and F030-F031) □ 2. POV or problem list 305.1 □ 3. V15.82
J-3.A.2		Same as J-3.A.1	Numerator 2: Number of patients identified as tobacco users.	Any of the following documented within the year prior to the end of the Report period: □ 1. Health Factor 0002 CURRENT SMOKER □ 2. HF 0003 CURRENT SMOKELESS □ 3. HF 0030 CURRENT SMOKER & SMOKELESS □ 4. smoking-related diagnoses 305.4 □ 5. V15.82
J-3.A.3		Same as J-3.A.1	Numerator 3: Number of patients counseled on tobacco cessation.	Numerator: PFE codes TO-QU (tobacco quit), TO-LA (tobacco lifestyle adaptation)
J-3.A.4		Same as J-3.A.1	Numerator 4: Number of patients in Tobacco cessation programs	Numerator: clinic code 94 (tobacco cessation clinic)
J-3.A.5		Same as J-3.A.1	Numerator 5: Number of people who have quit	Numerator: any of the following documented in the past year: □ 1. Health Factors F004 PREVIOUS SMOKER □ 2. HF F005 PREVIOUS SMOKELESS □ 3. HF F023 CESSATION-SMOKER □ 4. HF F024 CESSATION-SMOKELESS
J-3.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-3.A.1	
J-3.B.2		Same as J-3.B.1	Same as J-3.A.2	
J-3.B.3		Same as J-3.B.1	Same as J-3.A.3	
J-3.B.4		Same as J-3.B.1	Same as J-3.A.4	
J-3.B.5		Same as J-3.B.1	Same as J-3.A.5	
J-3.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-3.A.1	
J-3.C.2		Same as J-3.C.1	Same as J-3.A.2	
J-3.C.3		Same as J-3.C.1	Same as J-3.A.3	
J-3.C.4		Same as J-3.C.1	Same as J-3.A.4	
J-3.C.5		Same as J-3.C.1	Same as J-3.A.5	
J-3.D.1		Active Clinical patients diagnosed with cardiac disease in the past year.	Numerator 1: Patients who have been screened for tobacco use in year prior to the end of the Report period, using Health Factors or tobacco-related diagnosis	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) □ Numerator: Any of the following have been documented in the past year: □ 1. Any health factor for tobacco use (F001-F006, F023-F025 and F030-F031) □ 2. POV or problem list 305.1 □ 3. V15.82

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-3.D.2		Same as J-3.D.1	Numerator 2: Patients identified as tobacco users, using Health Factors or tobacco-related diagnosis.	Any of the following documented within the year prior to the end of the Report period:☐ 1. Health Factor 0002 CURRENT SMOKER☐ 2. HF 0003 CURRENT SMOKELESS☐ 3. HF 0030 CURRENT SMOKER & SMOKELESS☐ 4. smoking-related diagnoses 305.1☐ 5. V15.82
J-3.D.3		Same as J-3.D.1	Numerator 3: Patients counseled on tobacco cessation, identified by patient education codes.	Numerator: PFE codes TO-QU (tobacco quit), TO-LA (tobacco lifestyle adaptation)
J-3.D.4		Same as J-3.D.1	Numerator 4: Patients in tobacco cessation programs, defined as clinic code 94.	Numerator: clinic code 94 (tobacco cessation clinic)
J-3.D.5		Same as J-3.D.1	Numerator 5: Number of people who have quit, identified by Health Factors.	Numerator: any of the following documented in the past year:☐ 1. Health Factors F004 PREVIOUS SMOKER☐ 2. HF F005 PREVIOUS SMOKELESS☐ 3. HF F023 CESSATION-SMOKER☐ 4. HF F024 CESSATION-SMOKELESS
J-3.E.1		Male Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-3.A.1	
J-3.E.2		Same as J-3.E.1	Same as J-3.A.2	
J-3.E.3		Same as J-3.E.1	Same as J-3.A.3	
J-3.E.4		Same as J-3.E.1	Same as J-3.A.4	
J-3.E.5		Same as J-3.E.1	Same as J-3.A.5	
J-3.F.1		Female Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-3.A.1	
J-3.F.2		Same as J-3.F.1	Same as J-3.A.2	
J-3.F.3		Same as J-3.F.1	Same as J-3.A.3	
J-3.F.4		Same as J-3.F.1	Same as J-3.A.4	
J-3.F.5		Same as J-3.F.1	Same as J-3.A.5	
J-4.A.1	Cardiovascular Disease: Obesity	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Numerator 1: those for whom a BMI could be calculated	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V-POV file)☐ ☐ Numerator: See indicator 31☐ Calculates BMI using NHANES II.☐ For 18 and under, a height and weight must be taken on the same day any time in the year prior to the end of the Report period.☐ For 19 through 50, BMI within last five years.☐ For over 50, BMI within last two years
J-4.A.2		Same as J-4.A.1	Numerator 2: For those with a BMI calculated, those considered obese using BMI and standard BMI tables.	
J-4.A.3		Same as J-4.A.1	Numerator 3: For those with a BMI calculated, those considered overweight using BMI and standard BMI tables.	
J-4.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-4.A.1	
J-4.B.2		Same as J-4.B.1	Same as J-4.A.2	
J-4.B.3		Same as J-4.B.1	Same as J-4.A.3	
J-4.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-4.A.1	
J-4.C.2		Same as J-4.C.1	Same as J-4.A.2	
J-4.C.3		Same as J-4.C.1	Same as J-4.A.3	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-4.D.1		Active Clinical users diagnosed with cardiac disease in the past year.	Numerator 1: those for whom a BMI could be calculated	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: See indicator 31 <input type="checkbox"/> Calculates BMI using NHANES II. <input type="checkbox"/> For 18 and under, a height and weight must be taken on the same day any time in the year prior to the end of the Report period. <input type="checkbox"/> For 19 through 50, BMI within last five years. <input type="checkbox"/> For over 50, BMI within last two years
J-4.D.2		Same as J-4.D.1	Numerator 2: For those with a BMI calculated, those considered overweight but not obese using BMI and standard BMI tables.	
J-4.D.3		Same as J-4.D.1	Numerator 3: For those with a BMI calculated, those considered obese using BMI and standard BMI tables.	
		Same as J-4.D.1	Numerator 4: Total of Numerators 2 and 3, all overweight patients.	
J-4.E.1		Male Active Clinical users diagnosed with cardiac disease in the past year.	Same as J-4.A.1	
J-4.E.2		Same as J-4.E.1	Same as J-4.A.2	
J-4.E.3		Same as J-4.E.1	Same as J-4.A.3	
J-4.F.1		Female Active Clinical users diagnosed with cardiac disease in the past year.	Same as J-4.A.1	
J-4.F.2		Same as J-4.F.1	Same as J-4.A.2	
J-4.F.3		Same as J-4.F.1	Same as J-4.A.3	
J-5.A.1	Cardiovascular Disease Prevention: Exercise Education	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Patients who are provided patient education about exercise during past year.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: any Patient Education code containing "-EX"
J-5.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-5.A.1.	
J-5.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-5.A.1.	
J-5.D.1		Active Clinical patients diagnosed with cardiac disease in the past year.	Patients who are provided patient education about exercise during past year.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: any Patient Education code containing "-EX"
J-5.E.1		Male Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-5.A.1.	
J-5.F.1		Female Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-5.A.1.	
J-6.A.1	Mental Health and Cardiovascular Disease	All GPRA User Population patients diagnosed with cardiac disease in the past year.	Numerator: users diagnosed with depression and/or anxiety	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file) <input type="checkbox"/> <input type="checkbox"/> Numerator: at least two visits with depression diagnosis (purpose of visit 296.0-313.1 recorded in V POV file) in the year prior to the end of the Report period.
J-6.B.1		All male GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-6.A.1	
J-6.C.1		All female GPRA User Population patients diagnosed with cardiac disease in the past year.	Same as J-6.A.1	

ID	Title	FY03 Denominator	FY03 Numerator	FY03 Logic
J-6.D.1		Active Clinical patients diagnosed with cardiac disease in the past year.	Patients in the denominator with a diagnosis of depressive disorders, defined as at least two visits with diagnosis 296.0-313.1 in the year prior to the end of the Report period.	Denominator: at least two visits any time in the year prior to the end of the Report period with diagnosis of ischemic heart disease (Purpose of Visit 410.0-412.* or 414.0-414.9 recorded in the V POV file). <input type="checkbox"/> The numerator is defined as at least two visits with diagnosis of depressive disorders (purpose of visit 296.0-313.1 recorded in V POV file) in the year prior to the end of the Report period.
J-6.E.1		Male Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-6.A.1	
J-6.F.1		Female Active Clinical patients diagnosed with cardiac disease in the past year.	Same as J-6.A.1	

FY03 GPRA+ Indicator Desc									
				Reports					
ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
001.A.1	Diabetes	During FY 2003, continue tracking (i.e., data collection and analyses) Area age-specific diabetes prevalence rates to identify trends in the age-specific prevalence of diabetes (as a surrogate marker for diabetes incidence) for the AI/AN population.	1	Y	Y				HP 2010 5-2, 5-3
001.A.2			1	Y	Y				
001.B.1			1	Y	Y				
001.B.2			1	Y	Y				
001.C.1			1	Y	Y				
001.C.2			1	Y	Y				
001.D.1			1	Y	Y				
001.D.2			1	Y	Y				
001.E.1			1	Y	Y				
001.E.2			1	Y	Y				
001.F.1			1	Y	Y				
001.F.2			1	Y	Y				
001.G.1			1	Y	Y				
001.G.2			1	Y	Y				
001.H.1			1	Y	Y				
001.H.2			1	Y	Y				
001.I.1			1	Y	Y				
001.I.2			1	Y	Y				
001.J.1			1	Y	Y				
001.J.2			1	Y	Y				
001.K.1			1	Y	Y				
001.K.2			1	Y	Y				
001.L.1			1	Y	Y				
001.L.2			1	Y	Y				
001.M.1			1	Y	Y				
001.M.2			1	Y	Y				
001.N.1			1	Y	Y				
001.N.2			1	Y	Y				
001.O.1			1	Y	Y				
001.O.2			1	Y	Y				
001.P.1			1	Y	Y				
001.P.2			1	Y	Y				
001.Q.1			1	Y	Y				
001.Q.2			1	Y	Y				
001.R.1			1	Y	Y				
001.R.2			1	Y	Y				
001.S.1			1	Y	Y				
001.S.2			1	Y	Y				
001.TA.1				Y	Y				
001.TA.2				Y	Y				
001.TB.1				Y	Y				
001.TB.2				Y	Y				
001.TC.1				Y	Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
001.TC.2				Y	Y				
001.TD.1				Y	Y				
001.TD.2				Y	Y				
001.TE.1				Y	Y				
001.TE.2				Y	Y				
001.TF.1				Y	Y				
001.TF.2				Y	Y				
001.TG.1				Y	Y				
001.TG.2				Y	Y				
001.TH.1				Y	Y				
001.TH.2				Y	Y				
002.A.1	Diabetes: Glycemic Control	During FY 2003, maintain the FY 2002 performance level for glycemic control in the proportion of I/T/U clients with diagnosed diabetes.	2A						HP 2010 5-12
002.A.2			2A						
002.A.3			2A						
002.A.4			2A						
002.B.1			2A						
002.B.2			2A						
002.B.3			2A						
002.B.4			2A						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
002.C.1			2A	Y	Y	Y	9	10	
002.C.2			2A	Y	Y	Y	11	12	
002.C.3			2A	Y	Y	Y	13	14	
002.C.4			2A	Y	Y	Y	15	16	
002.D.1			2A						
002.D.2			2A						
002.D.3			2A						
002.D.4			2A						
003.A.1	Diabetes: Blood Pressure Control	During FY 2003, maintain the FY 2002 performance level for blood pressure control in the proportion of I/T/U clients with diagnosed diabetes who have achieved blood pressure control standards.	3A						HP 2010 12-9, 12-10
003.A.2			3A						
003.A.3			3A						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
003.B.1			3A						
003.B.2			3A						
003.B.3			3A						
003.C.1			3A	Y	Y	Y	17	18	
003.C.2			3A	Y	Y	Y	19	20	
003.C.3			3A	Y	Y	Y	21	22	
003.D.1			3A						
003.D.2			3A						
003.D.3			3A						
004.A.1	Diabetes: Dyslipidemia Assessment	During FY 2003, maintain the FY 2002 performance level for the proportion of I/T/U clients with diagnosed diabetes assessed for dyslipidemia (i. e., LDL cholesterol).	4A						HP 2010 12-15
004.A.2			4A						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
004.A.3			4A						
004.B.1			4A						
004.B.2			4A						
004.B.3			4A						
004.C.1			4A	Y	Y	Y	23	24	
004.C.2			4A	Y	Y	Y	25	26	
004.C.3			4A	Y	Y	Y	27	28	
004.D.1			4A						
004.D.2			4A						
004.D.3			4A						
005.A.1	Diabetes: Nephropathy Assessment	During FY 2003, maintain the proportion of I/T/U clients with diagnosed diabetes assessed for nephropathy.	5A						HP 2010 5-11

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
005.B.1			5A						
005.C.1			5A	Y	Y	Y	29	30	
005.D.1			5A						
006.A.1	Diabetic Retinopathy	During FY 2003, increase the proportion of American Indian/Alaska Native (AI/AN) diabetics who receive an annual diabetic retinal examination at designated sites by 3% over the FY 2002 rate. NOTE: The GPRA indicator reported at the national level only applies to xx test sites for FY03. This indicator is included here because all sites are expected to report on this indicator beginning in FY05. The numerator is currently defined very broadly for retinal screening.	D						HP 2010 5-13
006.B.1			D						
006.C.1			D	Y	Y	Y	31	32	

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
006.D.1			D						
007.A.1	Women's Health – Reduce Cervical Cancer Mortality: Pap Smear	During FY 2003, maintain the proportion of eligible women who have had a Pap screen within the previous three years at the FY 2002 levels.	6A	Y					HP 2010 3-4
007.A.2			6A						
007.B.1			6A		Y	Y	33	34	
007.B.2			6A		Y	Y	35	36	

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
008.A.1	Women's Health – Reduce Breast Cancer Mortality. Mammogram	Maintain mammography screening at the FY 2002 rate. (age range needs to be defined for denominator)	7	Y					HP 2010 3-3
008.A.2			7						
008.B.1			7		Y	Y	37	38	
008.B.2			7		Y	Y	39	40	
013.A.1	Oral Health: Access to Dental Service	Maintain the proportion of the AI/AN population that obtain access to dental services at the FY 2002 level.	12	Y	Y	Y	41	42	HP 2010 21-10, 21-12, 21-17
014.A.1	Oral Health: Dental Sealants	Maintain the number of sealants placed per year in AI/AN children at the FY 2002 level.	13	Y	Y	Y		43	HP 2010 21-8
014.A.2			13	Y	Y				
014.A.3			13	Y	Y				
014.A.4			13	Y	Y				
015.A.1	Oral Health: Diabetic Access to Dental Services	During FY 2003, increase the proportion of the AI/AN population diagnosed with diabetes who obtain access to dental services by 2% over the FY 2002 level.	14	Y	Y	Y			HP 2010 5-15

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
023.A.1	Public Health Nursing	Maintain the total number of public health nursing services (primary and secondary treatment and preventive services) provided to neonates, infants, and elders in all settings and the total number of home visits at the FY 2002 workload levels.	22						
023.A.2			22						
023.A.3			22	Y					
023.A.4			22	Y					
023.B.3			22	Y					
023.B.4			22	Y					
023.C.3			22	Y					
023.C.4			22	Y					
023.D.3			22						
023.D.4			22						
023.E.3			22	Y					
023.E.4			22	Y					
023.F.1			22		Y	Y			
023.F.2			22		Y	Y			
023.F.3			22		Y	Y			
023.F.4			22		Y	Y			
023.G.3			22		Y				
023.G.4			22		Y				
023.H.3			22		Y				
023.H.4			22		Y				
023.I.3			22		Y				
023.I.4			22		Y				
023.J.3			22		Y				
023.J.4			22		Y				
025.A.1	Adult Immunizations: Influenza	Maintain the FY 2002 rate for influenza vaccination levels among non-institutionalized adults age 65 years and older.	24	Y					HP 2010 14-29a
025.B.1			24						
025.C.1			24						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
025.D.1			24	Y	Y	Y			HP 2010 14-29c
025.E.1			24		Y	Y			
025.H.1			24						
025.I.1			24						
026.A.1	Adult Immunizations: Pneumococcal	Maintain the FY 2002 rate for pneumococcal vaccination levels among non-institutionalized adults age 65 years and older.	28	Y					HP 2010 14-29b
026.B.1			28	Y	Y	Y			HP 2010 14-29d
026.C.1			28		Y	Y			

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
030-1.AA.1	Cardiovascular Disease Prevention: Lipids Assessment	Implement culturally sensitive community-directed pilot cardiovascular disease prevention programs, including Lipids assessment	28	Y					
030-1.AA.2			28	Y					
030-1.AA.3			28	Y					
030-1.AA.4			28	Y					
030-1.AA.5			28	Y					
030-1.AB.1			28	Y					
030-1.AB.2			28	Y					
030-1.AB.3			28	Y					
030-1.AB.4			28	Y					
030-1.AB.5			28	Y					
030-1.AC.1			28	Y					
030-1.AC.2			28	Y					
030-1.AC.3			28	Y					
030-1.AC.4			28	Y					
030-1.AC.5			28	Y					
030-1.BA.1			28	Y	Y	Y			
030-1.BA.2			28	Y	Y	Y			
030-1.BA.3			28	Y	Y	Y			
030-1.BA.4			28	Y	Y	Y			
030-1.BA.5			28	Y	Y	Y			

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
030-1.BB.1			28	Y	Y				
030-1.BB.2			28	Y	Y				
030-1.BB.3			28	Y	Y				
030-1.BB.4			28	Y	Y				
030-1.BB.5			28	Y	Y				
030-1.BC.1			28	Y	Y				
030-1.BC.2			28	Y	Y				
030-1.BC.3			28	Y	Y				
030-1.BC.4			28	Y	Y				
030-1.BC.5			28	Y	Y				
030-1.CA.1			28		Y	Y			
030-1.CA.2			28		Y	Y			
030-1.CA.3			28		Y	Y			
030-1.CA.4			28		Y	Y			
030-1.CA.5			28		Y	Y			
030-1.CB.1			28		Y				
030-1.CB.2			28		Y				
030-1.CB.3			28		Y				
030-1.CB.4			28		Y				
030-1.CB.5			28		Y				
030-1.CC.1			28		Y				
030-1.CC.2			28		Y				
030-1.CC.3			28		Y				
030-1.CC.4			28		Y				
030-1.CC.5			28		Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
030-2.AA.1	Cardiovascular Disease Prevention: Hypertension Levels	Implement culturally sensitive community-directed pilot cardiovascular disease prevention programs, including measuring hypertension levels.	28	Y					HP 2010 12-10, 12-12
030-2.AA.2			28	Y					
030-2.AA.3			28	Y					
030-2.AA.4			28	Y					
030-2.AA.5			28	Y					
030-2.AB.1			28	Y					
030-2.AB.2			28	Y					
030-2.AB.3			28	Y					
030-2.AB.4			28	Y					
030-2.AB.5			28	Y					
030-2.AC.1			28	Y					
030-2.AC.2			28	Y					
030-2.AC.3			28	Y					
030-2.AC.4			28	Y					
030-2.AC.5			28	Y					
030-2.BA.1			28	Y	Y	Y			

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
030-2.BA.2			28	Y	Y	Y			
030-2.BA.3			28	Y	Y	Y			
030-2.BA.4			28	Y	Y	Y			
030-2.BA.5			28	Y	Y	Y			
030-2.BB.1			28	Y	Y				
030-2.BB.2			28	Y	Y				
030-2.BB.3			28	Y	Y				
030-2.BB.4			28	Y	Y				
030-2.BB.5			28	Y	Y				
030-2.BC.1			28	Y	Y				
030-2.BC.2			28	Y	Y				
030-2.BC.3			28	Y	Y				
030-2.BC.4			28	Y	Y				
030-2.BC.5			28	Y	Y				
030-2.CA.1			28		Y	Y			
030-2.CA.2			28		Y	Y			
030-2.CA.3			28		Y	Y			
030-2.CA.4			28		Y	Y			
030-2.CA.5			28		Y	Y			
030-2.CB.1			28		Y				
030-2.CB.2			28		Y				
030-2.CB.3			28		Y				
030-2.CB.4			28		Y				
030-2.CB.5			28		Y				
030-2.CC.1			28		Y				
030-2.CC.2			28		Y				
030-2.CC.3			28		Y				
030-2.CC.4			28		Y				
030-2.CC.5			28		Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.AA.1	Obesity Prevention and Treatment Plan	Begin implementation of the staff and IT development plans to assure securing height and weight data for all system users to monitor AI/AN population obesity. Each Area will decrease height and weight measurement omission rates and will report BMIs on children and adults.	29	Y					
031.AA.2			29	Y					
031.AA.3			29	Y					
031.AA.4			29	Y					
031.AB.1			29	Y					
031.AB.2			29	Y					
031.AB.3			29	Y					
031.AB.4			29	Y					
031.AC.1			29	Y					
031.AC.2			29	Y					
031.AC.3			29	Y					
031.AC.4			29	Y					
031.AD.1			29	Y					
031.AD.2			29	Y					
031.AD.3			29	Y					
031.AD.4			29	Y					
031.AE.1			29	Y					
031.AE.2			29	Y					
031.AE.3			29	Y					
031.AE.4			29	Y					
031.AF.1			29	Y					
031.AF.2			29	Y					
031.AF.3			29	Y					
031.AF.4			29	Y					
031.AG.1			29	Y					
031.AG.2			29	Y					
031.AG.3			29	Y					
031.AG.4			29	Y					
031.AH.1			29	Y					
031.AH.2			29	Y					
031.AH.3			29	Y					
031.AH.4			29	Y					
031.AI.1			29	Y					
031.AI.2			29	Y					
031.AI.3			29	Y					
031.AI.4			29	Y					
031.AJ.1			29	Y					
031.AJ.2			29	Y					
031.AJ.3			29	Y					

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.AJ.4			29	Y					
031.AK.1			29	Y					
031.AK.2			29	Y					
031.AK.3			29	Y					
031.AK.4			29	Y					
031.AL.1			29	Y					
031.AL.2			29	Y					
031.AL.3			29	Y					
031.AL.4			29	Y					
031.AM.1			29	Y					
031.AM.2			29	Y					
031.AM.3			29	Y					
031.AM.4			29	Y					
031.AN.1			29	Y					
031.AN.2			29	Y					
031.AN.3			29	Y					
031.AN.4			29	Y					
031.AO.1			29	Y					
031.AO.2			29	Y					
031.AO.3			29	Y					
031.AO.4			29	Y					
031.AP.1			29	Y					
031.AP.2			29	Y					
031.AP.3			29	Y					
031.AP.4			29	Y					
031.AQ.1			29	Y					
031.AQ.2			29	Y					
031.AQ.3			29	Y					
031.AQ.4			29	Y					
031.AR.1			29	Y					
031.AR.2			29	Y					
031.AR.3			29	Y					
031.AR.4			29	Y					
031.AS.1			29	Y					
031.AS.2			29	Y					
031.AS.3			29	Y					
031.AS.4			29	Y					
031.AT.1			29	Y					
031.AT.2			29	Y					
031.AT.3			29	Y					
031.AT.4			29	Y					
031.AU.1			29	Y					
031.AU.2			29	Y					
031.AU.3			29	Y					
031.AU.4			29	Y					
031.AV.1			29	Y					
031.AV.2			29	Y					

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.AV.3			29	Y					
031.AV.4			29	Y					
031.AW.1			29	Y					
031.AW.2			29	Y					
031.AW.3			29	Y					
031.AW.4			29	Y					
031.AX.1			29	Y					
031.AX.2			29	Y					
031.AX.3			29	Y					
031.AX.4			29	Y					
031.AY.1			29	Y					
031.AY.2			29	Y					
031.AY.3			29	Y					
031.AY.4			29	Y					
031.AZ.1			29	Y					
031.AZ.2			29	Y					
031.AZ.3			29	Y					
031.AZ.4			29	Y					
031.BA.1			29	Y					
031.BA.2			29	Y					
031.BA.3			29	Y					
031.BA.4			29	Y					
031.BB.1			29	Y					
031.BB.2			29	Y					
031.BB.3			29	Y					
031.BB.4			29	Y					
031.BC.1			29	Y					
031.BC.2			29	Y					
031.BC.3			29	Y					
031.BC.4			29	Y					
031.BD.1			29	Y					
031.BD.2			29	Y					
031.BD.3			29	Y					
031.BD.4			29	Y					
031.CA.1			29		Y	Y			
031.CA.2			29		Y	Y			
031.CA.3			29		Y	Y			
031.CA.4			29		Y	Y			
031.CB.1			29		Y				
031.CB.2			29		Y				
031.CB.3			29		Y				
031.CB.4			29		Y				
031.CC.1			29		Y				
031.CC.2			29		Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.CC.3			29		Y				
031.CC.4			29		Y				
031.CD.1			29		Y				
031.CD.2			29		Y				
031.CD.3			29		Y				
031.CD.4			29		Y				
031.CE.1			29		Y				
031.CE.2			29		Y				
031.CE.3			29		Y				
031.CE.4			29		Y				
031.CF.1			29		Y				
031.CF.2			29		Y				
031.CF.3			29		Y				
031.CF.4			29		Y				
031.CG.1			29		Y				
031.CG.2			29		Y				
031.CG.3			29		Y				
031.CG.4			29		Y				
031.CH.1			29		Y				
031.CH.2			29		Y				
031.CH.3			29		Y				
031.CH.4			29		Y				
031.CI.1			29		Y				
031.CI.2			29		Y				
031.CI.3			29		Y				
031.CI.4			29		Y				
031.CJ.1			29		Y				
031.CJ.2			29		Y				
031.CJ.3			29		Y				
031.CJ.4			29		Y				
031.CK.1			29		Y				
031.CK.2			29		Y				
031.CK.3			29		Y				
031.CK.4			29		Y				
031.CL.1			29		Y				
031.CL.2			29		Y				
031.CL.3			29		Y				
031.CL.4			29		Y				
031.CM.1			29		Y				
031.CM.2			29		Y				
031.CM.3			29		Y				
031.CM.4			29		Y				
031.CN.1			29		Y				
031.CN.2			29		Y				
031.CN.3			29		Y				
031.CN.4			29		Y				
031.CO.1			29		Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.CO.2			29		Y				
031.CO.3			29		Y				
031.CO.4			29		Y				
031.CP.1			29		Y				
031.CP.2			29		Y				
031.CP.3			29		Y				
031.CP.4			29		Y				
031.CQ.1			29		Y				
031.CQ.2			29		Y				
031.CQ.3			29		Y				
031.CQ.4			29		Y				
031.CR.1			29		Y				
031.CR.2			29		Y				
031.CR.3			29		Y				
031.CR.4			29		Y				
031.CS.1			29		Y				
031.CS.2			29		Y				
031.CS.3			29		Y				
031.CS.4			29		Y				
031.CT.1			29		Y				
031.CT.2			29		Y				
031.CT.3			29		Y				
031.CT.4			29		Y				
031.CU.1			29		Y				
031.CU.2			29		Y				
031.CU.3			29		Y				
031.CU.4			29		Y				
031.CV.1			29		Y				
031.CV.2			29		Y				
031.CV.3			29		Y				
031.CV.4			29		Y				
031.CW.1			29		Y				
031.CW.2			29		Y				
031.CW.3			29		Y				
031.CW.4			29		Y				
031.CX.1			29		Y				
031.CX.2			29		Y				
031.CX.3			29		Y				
031.CX.4			29		Y				
031.CY.1			29		Y				
031.CY.2			29		Y				
031.CY.3			29		Y				
031.CY.4			29		Y				
031.CZ.1			29		Y				
031.CZ.2			29		Y				
031.CZ.3			29		Y				
031.CZ.4			29		Y				

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
031.DA.1			29		Y				
031.DA.2			29		Y				
031.DA.3			29		Y				
031.DA.4			29		Y				
031.DB.1			29		Y				
031.DB.2			29		Y				
031.DB.3			29		Y				
031.DB.4			29		Y				
031.DC.1			29		Y				
031.DC.2			29		Y				
031.DC.3			29		Y				
031.DC.4			29		Y				
031.DD.1			29		Y				
031.DD.2			29		Y				
031.DD.3			29		Y				
031.DD.4			29		Y				
A.A.1	Diabetes and Mental Health	Determine the proportion of diabetic patients with a diagnosis of depressive disorders.	A		Y	Y			HP 2010 6-3
B.A.1	Colorectal Cancer. Reduce the Colorectal Cancer death rate	Increase the proportion of AI/AN persons who have had screening for Colorectal Cancer.	B						HP 2010 3-5

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
B.A.2			B						
B.B.1			B						
B.B.2			B						
B.C.1			B						
B.C.2			B						
B.D.1			B		Y	Y			
B.D.2			B		Y	Y			
B.E.1			B						
B.E.2			B						
B.F.1			B						
B.F.2			B						
C-1.AA.1	Patient Education: Diet and Exercise	Increase the proportion of persons who are provided patient education on diet and exercise.	C						HP 19-1, 19-2, 19-3
C-1.AA.2			C						
C-1.AB.1			C						
C-1.AB.2			C						
C-1.AC.1			C						
C-1.AC.2			C						
C-1.AD.1			C						
C-1.AD.2			C						
C-1.AE.1			C						
C-1.AE.2			C						
C-1.AF.1			C						
C-1.AF.2			C						
C-1.AG.1			C						
C-1.AG.2			C						
C-1.AH.1			C						
C-1.AH.2			C						
C-1.AI.1			C						
C-1.AI.2			C						
C-1.AJ.1			C						
C-1.AJ.2			C						
C-1.AK.1			C						
C-1.AK.2			C						
C-1.AL.1			C						
C-1.AL.2			C						
C-1.AM.1			C						
C-1.AM.2			C						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
C-1.AN.1			C						
C-1.AN.2			C						
C-1.AO.1			C						
C-1.AO.2			C						
C-1.AP.1			C						
C-1.AP.2			C						
C-1.AQ.1			C						
C-1.AQ.2			C						
C-1.AR.1			C						
C-1.AR.2			C						
C-1.BA.1	Patient Education: Diet and Exercise for Diabetics	Increase the proportion of persons who are provided patient education on diet and exercise.	C			Y			HP 2010 19-17
C-1.BA.2			C			Y			
C-1.BB.1			C						
C-1.BB.2			C						
C-1.BC.1			C						
C-1.BC.2			C						
C-1.BD.1			C						
C-1.BD.2			C						
C-1.BE.1			C						
C-1.BE.2			C						
C-1.BF.1			C						
C-1.BF.2			C						
C-1.BG.1			C						
C-1.BG.2			C						
C-1.BH.1			C						
C-1.BH.2			C						
C-1.BI.1			C						
C-1.BI.2			C						
C-1.BJ.1			C						
C-1.BJ.2			C						
C-1.BK.1			C						
C-1.BK.2			C						
C-1.BL.1			C						
C-1.BL.2			C						
C-1.BM.1			C						
C-1.BM.2			C						
C-1.BN.1			C						
C-1.BN.2			C						
C-1.BO.1			C						
C-1.BO.2			C						
C-1.BP.1			C						
C-1.BP.2			C						
C-1.BQ.1			C						
C-1.BQ.2			C						
C-1.BR.1			C						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
C-1.BR.2			C						
C-1.CA.1			C			Y			
C-1.CA.2			C			Y			
C-1.CB.1			C						
C-1.CB.2			C						
C-1.CC.1			C						
C-1.CC.2			C						
C-1.CD.1			C						
C-1.CD.2			C						
C-1.CE.1			C						
C-1.CE.2			C						
C-1.CF.1			C						
C-1.CF.2			C						
C-1.CG.1			C						
C-1.CG.2			C						
C-1.CH.1			C						
C-1.CH.2			C						
C-1.CI.1			C						
C-1.CI.2			C						
C-1.CJ.1			C						
C-1.CJ.2			C						
C-1.CK.1			C						
C-1.CK.2			C						
C-1.CL.1			C						
C-1.CL.2			C						
C-1.CM.1			C						
C-1.CM.2			C						
C-1.CN.1			C						
C-1.CN.2			C						
C-1.CO.1			C						
C-1.CO.2			C						
C-1.CP.1			C						
C-1.CP.2			C						
C-1.CQ.1			C						
C-1.CQ.2			C						
C-1.CR.1			C						
C-1.CR.2			C						
C-2.A.1	Patient Education: Medications	Increase the proportion of patients taking medications who are receiving patient education about their medications.							
C-2.B.1					Y	Y			

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
D.A.1	Cholesterol Screening	Increase the proportion of adults who have had their blood cholesterol checked within the preceding 5 years.							HP 2010 12-15
D.B.1									
D.C.1									
D.D.1					Y	Y			
D.E.1									
D.F.1									
E-1.A.1	HIV Quality of Care	Increase the proportion of HIV patients who receive recommended tests.							HP 2010 13-13
E-1.A.2									
E-1.A.3									
E-1.B.1									
E-1.B.2									
E-1.B.3									
E-1.C.1									
E-1.C.2									
E-1.C.3									
E-1.D.1									
E-1.D.2									
E-1.D.3									
E-1.E.1									

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
E-1.E.2									
E-1.E.3									
E-1.F.1									
E-1.F.2									
E-1.F.3									
E-2.A.1	Prenatal HIV Testing and Education	Increase the proportion of pregnant women receiving HIV testing.							
E-2.A.2									
E-2.A.3									HP 2010 25-17
E-2.B.1					Y	Y			
E-2.B.2					Y	Y			
E-2.B.3					Y	Y			
F.A.1	Domestic Violence Screening	Increase the proportion of female patients who received screening annually for domestic violence.							
F.A.2									HP 2010 15-34
F.A.3									
F.B.1					Y	Y			
F.B.2					Y	Y			
F.B.3					Y	Y			
G.A.1	Alcohol Screening (FAS Prevention)	Increase alcohol screening in women of child-bearing age							HP 2010 16-17a
G.B.1					Y	Y			
H.AA.1	Tobacco Use and Exposure to second hand smoke	Increase annual screening for tobacco use, as a surrogate marker for reducing Area age-specific prevalence rates for the smoking and for environmental exposure to tobacco in the home.	30						
H.AA.2			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.AA.3			30						
H.AA.4			30						
H.AA.5			30						HP 2010 27-5, 27-7
H.AA.6			30						
H.AB.1			30						
H.AB.2			30						
H.AB.3			30						
H.AB.4			30						
H.AB.5			30						
H.AB.6			30						
H.AC.1			30						
H.AC.2			30						
H.AC.3			30						
H.AC.4			30						
H.AC.5			30						
H.AC.6			30						
H.AD.1			30						HP 2010 27-1, 27-2
H.AD.2			30						HP 2010 27-1, 27-2
H.AD.3			30						HP 2010 27-9
H.AD.4			30						
H.AD.5			30						
H.AD.6			30						
H.AE.1			30						
H.AE.2			30						
H.AE.3			30						
H.AE.4			30						
H.AE.5			30						
H.AE.6			30						
H.AF.1			30						
H.AF.2			30						
H.AF.3			30						
H.AF.4			30						
H.AF.5			30						
H.AF.6			30						
H.AG.1			30						HP 2010 27.2
H.AG.2			30						
H.AG.3			30						
H.AG.4			30						
H.AG.5			30						
H.AG.6			30						
H.AH.1			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.AH.2			30						
H.AH.3			30						
H.AH.4			30						
H.AH.5			30						
H.AH.6			30						
H.AI.1			30						
H.AI.2			30						
H.AI.3			30						
H.AI.4			30						
H.AI.5			30						
H.AI.6			30						
H.AJ.1			30						HP 2010 27-1
H.AJ.2			30						
H.AJ.3			30						
H.AJ.4			30						
H.AJ.5			30						
H.AJ.6			30						
H.AK.1			30						
H.AK.2			30						
H.AK.3			30						
H.AK.4			30						
H.AK.5			30						
H.AK.6			30						
H.AL.1			30						
H.AL.2			30						
H.AL.3			30						
H.AL.4			30						
H.AL.5			30						
H.AL.6			30						
H.AM.1			30						HP 2010 27-1
H.AM.2			30						
H.AM.3			30						
H.AM.4			30						
H.AM.5			30						
H.AM.6			30						
H.AN.1			30						
H.AN.2			30						
H.AN.3			30						
H.AN.4			30						
H.AN.5			30						
H.AN.6			30						
H.AO.1			30						
H.AO.2			30						
H.AO.3			30						
H.AO.4			30						
H.AO.5			30						
H.AO.6			30						
H.AP.1			30						HP 2010 27-1
H.AP.2			30						
H.AP.3			30						
H.AP.4			30						
H.AP.5			30						
H.AP.6			30						
H.AQ.1			30						
H.AQ.2			30						
H.AQ.3			30						
H.AQ.4			30						
H.AQ.5			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.AQ.6			30						
H.AR.1			30						
H.AR.2			30						
H.AR.3			30						
H.AR.4			30						
H.AR.5			30						
H.AR.6			30						
H.AS.1			30						HP 2010 27-1
H.AS.2			30						
H.AS.3			30						
H.AS.4			30						
H.AS.5			30						
H.AS.6			30						
H.AT.1			30						
H.AT.2			30						
H.AT.3			30						
H.AT.4			30						
H.AT.5			30						
H.AT.6			30						
H.AU.1			30						
H.AU.2			30						
H.AU.3			30						
H.AU.4			30						
H.AU.5			30						
H.AU.6			30						
H.BA.1			30		Y	Y			
H.BA.2			30		Y	Y			
H.BA.3			30		Y	Y			
H.BA.4			30		Y	Y			
H.BA.5			30		Y	Y			
H.BA.6			30		Y	Y			
H.BB.1			30						
H.BB.2			30						
H.BB.3			30						
H.BB.4			30						
H.BB.5			30						
H.BB.6			30						
H.BC.1			30						
H.BC.2			30						
H.BC.3			30						
H.BC.4			30						
H.BC.5			30						
H.BC.6			30						
H.BD.1			30		Y				
H.BD.2			30		Y				
H.BD.3			30		Y				
H.BD.4			30		Y				
H.BD.5			30		Y				
H.BD.6			30		Y				
H.BE.1			30						
H.BE.2			30						
H.BE.3			30						
H.BE.4			30						
H.BE.5			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.BE.6			30						
H.BF.1			30						
H.BF.2			30						
H.BF.3			30						
H.BF.4			30						
H.BF.5			30						
H.BF.6			30						
H.BG.1			30		Y				
H.BG.2			30		Y				
H.BG.3			30		Y				
H.BG.4			30		Y				
H.BG.5			30		Y				
H.BG.6			30		Y				
H.BH.1			30						
H.BH.2			30						
H.BH.3			30						
H.BH.4			30						
H.BH.5			30						
H.BH.6			30						
H.BI.1			30						
H.BI.2			30						
H.BI.3			30						
H.BI.4			30						
H.BI.5			30						
H.BI.6			30						
H.BJ.1			30		Y				
H.BJ.2			30		Y				
H.BJ.3			30		Y				
H.BJ.4			30		Y				
H.BJ.5			30		Y				
H.BJ.6			30		Y				
H.BK.1			30						
H.BK.2			30						
H.BK.3			30						
H.BK.4			30						
H.BK.5			30						
H.BK.6			30						
H.BL.1			30						
H.BL.2			30						
H.BL.3			30						
H.BL.4			30						
H.BL.5			30						
H.BL.6			30						
H.BM.1			30		Y				
H.BM.2			30		Y				
H.BM.3			30		Y				
H.BM.4			30		Y				
H.BM.5			30		Y				
H.BM.6			30		Y				
H.BN.1			30						
H.BN.2			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.BN.3			30						
H.BN.4			30						
H.BN.5			30						
H.BN.6			30						
H.BO.1			30						
H.BO.2			30						
H.BO.3			30						
H.BO.4			30						
H.BO.5			30						
H.BO.6			30						
H.BP.1			30		Y				
H.BP.2			30		Y				
H.BP.3			30		Y				
H.BP.4			30		Y				
H.BP.5			30		Y				
H.BP.6			30		Y				
H.BQ.1			30						
H.BQ.2			30						
H.BQ.3			30						
H.BQ.4			30						
H.BQ.5			30						
H.BQ.6			30						
H.BR.1			30						
H.BR.2			30						
H.BR.3			30						
H.BR.4			30						
H.BR.5			30						
H.BR.6			30						
H.BS.1			30		Y				
H.BS.2			30		Y				
H.BS.3			30		Y				
H.BS.4			30		Y				
H.BS.5			30		Y				
H.BS.6			30		Y				
H.BT.1			30						
H.BT.2			30						
H.BT.3			30						
H.BT.4			30						
H.BT.5			30						
H.BT.6			30						
H.BU.1			30						
H.BU.2			30						
H.BU.3			30						
H.BU.4			30						
H.BU.5			30						
H.BU.6			30						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
H.CA.1			30						
H.CA.2			30						
H.CA.3			30						
H.CA.4			30						
H.CA.5			30						HP 2010 27-6
H.CA.6			30						
H.DA.1			30		Y	Y			
H.DA.2			30		Y	Y			
H.DA.3			30		Y	Y			
H.DA.4			30		Y	Y			
H.DA.5			30		Y	Y			
H.DA.6			30						
I.A.1	Asthma	Reduce hospitalizations for asthma.							
I.A.2									
I.B.1									HP 2010 24-2a.
I.B.2									HP 2010 24-2a
I.C.1									HP 2010 24-2b
I.C.2									HP 2010 24-2b
I.D.1									HP 2010 24-2c
I.D.2									HP 2010 24-2c
I.E.1						Y			
I.E.2						Y			
I.F.1									
I.F.2									
I.G.1									
I.G.2									
I.H.1									
I.H.2									

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-1.A.1	Cardiovascular-Disease: Lipids-Assessment	Increase the proportion of patients with ischemic heart disease who had a lipids assessment and whose LDL result was good.							HP 2010-12-9, 12-10
J-1.A.2									
J-1.A.3									
J-1.A.4									
J-1.A.5									
J-1.B.1									
J-1.B.2									
J-1.B.3									
J-1.B.4									
J-1.B.5									
J-1.C.1									
J-1.C.2									
J-1.C.3									
J-1.C.4									
J-1.C.5									

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-1.D.1					Y	Y			
J-1.D.2					Y	Y			
J-1.D.3					Y	Y			
J-1.D.4					Y	Y			
J-1.D.5					Y	Y			
J-1.E.1									
J-1.E.2									
J-1.E.3									
J-1.E.4									
J-1.E.5									
J-1.F.1									
J-1.F.2									
J-1.F.3									
J-1.F.4									
J-1.F.5									
J-2.A.1	Cardiovascular-Disease: Hypertension	Increase the proportion of patients with ischemic heart disease who had optimal or controlled blood pressure.							

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-2.A.2									
J-2.A.3									
J-2.A.4									
J-2.A.5									
J-2.B.1									
J-2.B.2									
J-2.B.3									
J-2.B.4									
J-2.B.5									
J-2.C.1									
J-2.C.2									
J-2.C.3									
J-2.C.4									
J-2.C.5									
J-2.D.1					Y	Y			
J-2.D.2					Y	Y			
J-2.D.3					Y	Y			
J-2.D.4					Y	Y			
J-2.D.5					Y	Y			
J-2.E.1									
J-2.E.2									
J-2.E.3									

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-2.E.4									
J-2.E.5									
J-2.F.1									
J-2.F.2									
J-2.F.4									
J-2.F.5									
J-2.F.30									
J-3.A.1	Cardiovascular Disease Prevention: Tobacco-Use Rate	Increase the proportion of patients with ischemic heart disease who were screened for tobacco use and received patient education on tobacco cessation.							
J-3.A.2									
J-3.A.3									HP-2010-27-1
J-3.A.4									
J-3.A.5									
J-3.B.1									
J-3.B.2									
J-3.B.3									
J-3.B.4									
J-3.B.5									
J-3.C.1									
J-3.C.2									
J-3.C.3									
J-3.C.4									
J-3.C.5									
J-3.D.1					Y	Y			

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-3.D.2					Y	Y			
J-3.D.3					Y	Y			
J-3.D.4					Y	Y			
J-3.D.5					Y	Y			
J-3.E.1									
J-3.E.2									
J-3.E.3									
J-3.E.4									
J-3.E.5									
J-3.F.1									
J-3.F.2									
J-3.F.3									
J-3.F.4									
J-3.F.5									
J-4.A.1	Cardiovascular Disease: Obesity	Increase the proportion of patients with ischemic heart disease whose BMI can be measured and decrease proportion of patients who are overweight.	28						HP 2010 19-17
J-4.A.2			28						
J-4.A.3			28						
J-4.B.1			28						
J-4.B.2			28						
J-4.B.3			28						
J-4.C.1			28						
J-4.C.2			28						
J-4.C.3			28						

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-4.D.1			28		Y	Y			
J-4.D.2			28		Y	Y			
J-4.D.3			28		Y	Y			
J-4.E.1			28						
J-4.E.2			28						
J-4.E.3			28						
J-4.F.1			28						
J-4.F.2			28						
J-4.F.3			28						
J-5.A.1	Cardiovascular Disease Prevention: Exercise-Education	Increase the proportion of patients with ischemic heart disease who are receiving patient-education about the benefits of exercise.							HP 2010 12-11, 10-17
J-5.B.1									
J-5.C.1									
J-5.D.1					Y	Y			
J-5.E.1									
J-5.F.1									
J-6.A.1	Mental Health and Cardiovascular Disease	Identify the proportion of patients with ischemic heart disease who are diagnosed with depression or anxiety							HP 2010 6-3
J-6.B.1									
J-6.C.1									

ID	Title	Description	FY02 ID	GPRA	Area APP	EISS Y/N	EISS Den	EISS Num	Source
J-6.D.1		Identify the proportion of patients with ischemic heart disease who are diagnosed with depression or anxiety.			Y	Y			
J-6.E.1									
J-6.F.1									